



2010 RCD 25TH ANNIVERSARY CELEBRATION GALA - CABARET

TICKET ORDER FORM

Date: _____

Name: _____ Company: _____
(If applicable)

Address: _____
Unit Street City Province Postal Code

Telephone: (H) _____ (W) _____ Email: _____

Number of Tickets Ordered: _____ Payment Amount: \$ _____
(Price per ticket is \$80)

Payment Method: Invoice

Cash (Do not send cash in the mail) Cheque (Make cheque or money order payable to RCD) Money Order

Visa Master Card

Credit Card # _____

Card Holder Name _____

Expiry Date _____ Amount Charged \$ _____

Card Holder Signature _____

Ticket Delivery: Pick-up Mail Reserved at Door

Tax Receipt Requested: Yes No (\$25 Tax Receipt will be issued for each ticket purchased)

Please return the Ticket Order Form to Eileen Kalshoven at the RCD:

By Mail: RCD, 100-5671 No. 3 Road, Richmond, BC V6X 2C7
 Or fax to: 604-232-2415
 Or email to: eileen@rcdrichmond.org

For more info, please call 604-232-2404 or visit www.rcdrichmond.org