Office Use:

GALA TICKET ORDER FORM

G	SALA TICKET ORDER FORM	No. of Ticket
		Ticket No
Date:		Receipt No.
Name:	Company	/: (If applicable)
Address:	Street	City Province Postal Code
Telephone: (H)	(W)	_ Email:
Number of Tickets	Ordered: Payment Ar (Price p	mount: \$ er ticket is \$95 or \$900 for a table of 10)
Payment Method:	Invoice	
		ue Money Order heque or money order payable to RCD)
	Visa ☐ Master Card	□ Debit Card □
	Card #	
	Card Holder Name	
	Expiry Date	Amount Charged \$
	Card Holder Signature	
	Authorization # (office use)	
Ticket Delivery:	Pick-up ☐ Mail I	☐ Reserved at Door ☐
Tax Receipt Reque	ested: Yes 🗆 No 🗖 (\$20	Tax Receipt will be issued for each ticket purchased)
Please return the T	icket Order Form to Ella Huang at	the RCD:

By Mail: RCD, 100-5671 No. 3 Road, Richmond, BC V6X 2C7

Or fax to: 604-232-2415

Or email to: ella@rcdrichmond.org

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