



NATIONAL TEAMS AWARDS BANQUET AND FUNDRAISER

January 16th, 2010

Renaissance Toronto Downtown (Rogers Centre)



REGISTRATION:

Name: _____ Phone: _____
Company: _____ Day Phone: _____
Address: _____ E-Mail: _____

City: _____
Province/State: _____ Postal/Zip Code: _____

I would like to reserve _____ table settings (\$400 per setting)
I would like to reserve _____ table(s) with 8 settings per table (\$3200 per table)
I would like to reserve _____ table(s) with 10 settings per table (\$4000 per table)

Total amount to be paid: _____



GUESTS:

My guests will be: (additional names may be noted on a separate attachment)

Name: _____ Name: _____
Name: _____ Name: _____
Name: _____ Name: _____
Name: _____ Name: _____
Name: _____ Name: _____




I would like a tax receipt for my donation:

YES

☐

NO

☐

 Please fax this registration form along with your full credit card information or mail this form with a cheque payable to Baseball Canada to the following contact:

www.baseball.ca

Att: Greg Hamilton
Baseball Canada
Suite A7 - 2212 Gladwin Crescent
Ottawa, ON K1B 5N1
Tel.: (613) 748-5606 ext. 225 Fax: (613) 748-5767
E-Mail: ghamilton@baseball.ca