

# NATIONAL TEAMS AWARDS BANQUET & FUNDRAISER

**JANUARY 14, 2023**

**TORONTO MARRIOTT CITY CENTRE HOTEL  
(ROGERS CENTRE)**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
COMPANY: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
PROVINCE/STATE: \_\_\_\_\_ POST/ZIP: \_\_\_\_\_

I WOULD LIKE TO RESERVE \_\_\_\_\_ TABLE SETTINGS

(\$500EACH)

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(\$500EACH)

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(\$500EACH)

TOTAL AMOUNT TO BE PAID \_\_\_\_\_

CHEQUE  CREDIT CARD

## CREDIT CARD INFORMATION

NAME: \_\_\_\_\_

CREDIT CARD #: \_\_\_\_\_

EXPIRY (MM-YY): \_\_\_\_\_

MY GUESTS WILL BE

(ADDITIONAL NAMES CAN BE NOTED SEPARATELY)

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

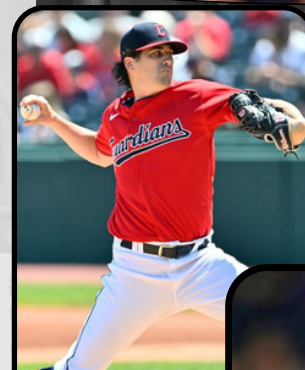
NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

I WOULD LIKE A TAX RECEIPT FOR MY DONATION:

YES  NO

PLEASE EMAIL OR MAIL THIS FORM TO  
GHAMILTON@BASEBALL.CA OR  
NANCY@BASEBALL.CA UPON COMPLETION



BASEBALLCANADA

