



## SEAT RESERVATION FORM

Name of Your Organization: \_\_\_\_\_

Name of Purchaser: \_\_\_\_\_

NAME TO APPEAR ON RESERVATION: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Option A:** Number of seats: \_\_\_\_\_ @ \$50.00 ea. = \$ \_\_\_\_\_

**Option B:** Table of ten seats: \_\_\_\_\_ @ \$500.00 ea. = \$ \_\_\_\_\_

**Option C:** I would like to **donate** a seat(s) for low-income seniors to attend.  
Please send me an Income Tax donation receipt: ☐ YES ☐ NO

Number of seats to **donate**: \_\_\_\_\_ @ \$50.00 ea. = \$ \_\_\_\_\_

If you know another party attending and would like to be seated with them, please provide the name and phone number:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Sage protects your personal information. All information provided will be protected under Canada's privacy laws. We will not use any personal information for any purpose other than intended.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Method of Payment:

Cheque or Money Order (enclosed – payable to Sage)      Visa      MasterCard

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_

**Please note that tickets are also available online at [www.mysage.ca/events/awards](http://www.mysage.ca/events/awards).**

Send by mail, email, or phone to order. Please do not send by fax.  
**Sage Seniors Association** 15 Sir Winston Churchill Square NW, Edmonton AB T5J 2E5  
Phone: 780.701.9010 Email: [eweisbrot@MySage.ca](mailto:eweisbrot@MySage.ca)