



Eastview
Boys & Girls Club

You're Cordially Invited...

Clubhouse Rock

3rd Annual Gala

June 10, 2010, 6PM

Tosca Banquet & Conference Centre

800 Champlain Avenue at Thornton Rd, Oshawa

The most fun you'll ever have at a Gala!

~ Cocktails ~
~ Reception ~
~ Dinner ~
~ Entertainment ~
~ Dancing ~
~ Live & Silent Auction ~
~ Formal Attire ~

How do I submit my ticket order?

1. Fill in the ticket order form Completing as much information as possible about your guests.
2. Return your ticket order by:
Mail: Eastview Boys and Girls Club, 433 Eulalie Avenue, Oshawa, ON L1H 2C6
Fax: 905~728~5126
Phone: 905~728~5121
Email: lmcneebaker@eastviewbgc.com
3. Please indicate requests for Vegetarian meals by inserting a "V" at the end of the guest's name.
4. Your tickets will be delivered to you promptly upon receiving your completed order and payment.

If you have any questions about your ticket order or any aspect of our event please feel free to call 905~728~5121.

Thank you for your support of Eastview Boys and Girls Club.

We look forward to greeting you on June 10, 2010



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Ticket Order Form: Tables of ten (10)
Tickets: \$85.00 each
Please print off and send.
Thank you for your support!



**Eastview
Boys & Girls Club**

1. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

2. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

3. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

4. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

5. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

6. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

Method of Payment: Visa _____ Master Card _____ Cash _____ Cheque _____

Total Amount: \$ _____ Number of Tickets: _____ Number of Vegetarian Meals: _____

Name on Card: _____ Exp: _____

Card Number: _____ Signature: _____

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7. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

8. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

9. Name: _____

Address: _____

Postal Code: _____ Phone #: _____

Email: _____

10. Name: _____

Address: _____

Postal Code: _____ Phone# _____

Email: _____

Please indicated if you have any special arrangements to be made with regard to the seating plan. We will do our best to accommodate your request.

Method of Payment: Visa _____ Master Card _____ Cash _____ Cheque _____

Total Amount: \$ _____ Number of Tickets: _____ Number of Vegetarian Meals: _____

Name on Card: _____ Exp: _____

Card Number: _____ Signature: _____