



## 2019 Date with a Star: Individual Ticket Form

### Contact/Tax Receipt Information:

Name /Company name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

*Early Bird (Until Dec.28th) - \$125*

*Regular Rate - \$140*

**Ticket Order:** \_\_\_\_\_ @ \_\_\_\_\_ = \_\_\_\_\_

I would like a tax receipt for one half of the total amount submitted. Name on Tax Receipt \_\_\_\_\_

### Method of payment:

Total Payment: \$ \_\_\_\_\_ Cheque  Cash  Credit Card

Credit card number \_\_\_\_\_

Expiry Date \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_

**Please send this completed form and method of payment to:**

Learning Disabilities Association of Manitoba - 617 Erin Street, Wpg, MB R3G 2W1

P: (204) 774-1821 ext 2 E: ldamanitoba7@mymts.net



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*The right to learn, the power to achieve*