## PRESENTING PARTNER OF THE EVENING



## **BENEFIT EVENING**

In support of Scleroderma Quebec



## **October 22, 2019**

Cabaret du Casino de Montréal

REGISTRATION FORM / SPONSORS AND TABLES						
To confirm your sponsorship, please return this completed form by email to info@sclerodermie.ca.  For credit card reservations, please send by fax to 514-666-1639 or by mail.						
Method of payment: Cheque	Visa	MasterCard Please invoice me by mail				
Credit Card Number	Expiration Date/					
Card holder's name			Signature (Credit Card)			
Address your cheque to Scleroderma Quebec and send it with the form to: Scleroderma Quebec - 550, chemin Chambly, Suite 40 Longueuil QC J4H 3L8 For more information: 514-990-6789 / 1-844-990-6789						
Information to be completed for the tickets and for billing purposes:						
Name		Company				
Address		Suite/Floor				
City	Postal Code	Code		Telephone		
Email address to send the electronic tickets						
I accept email communications from Scleroderma Quebec.						
My choice (See the detailed benefits on the attached partnership plan)						
DIAMOND Sponsor –	\$15,000		GOLD Sponso	or –	\$5,000	
PLATINUM Sponsor —	\$10,000	S	SILVER Spons	or –	\$3,750	
RUBY Sponsor –	\$7,500		BRONZE Spor	nsor –	\$2,500	
Corporate Table for 8 people - preferred table placement - \$7,500*						
Corporate Table for 8 people - \$5,000*			*A tax re	*A tax receipt for the donation portion will be sent later.		
Donor I cannot attend the Benefit Evening but wish to make a donation: \$  (For donations, a tax receipt for the entire amount will be sent later.)						