

ORDER FORM

Monday, January 18th 2010
5:30 pm Reception

World Trade and Convention Centre
1800 Argyle Street, Halifax



I would like _____ ticket(s) @ \$125 each \$ _____

I would like _____ table(s) of 10 @ \$1250 each \$ _____

Gratuity Included - Alcoholic Beverages Not Included

BILLING INFORMATION:

COMPANY/NAME: _____

CONTACT: _____

ADDRESS: _____

POSTAL CODE: _____ E-MAIL: _____

PHONE: _____ FAX: _____

VISA # _____ EXPIRY DATE: _____

CARDHOLDER: _____

CHEQUE

Please make cheques payable to:
The Learning Disabilities Association of Nova Scotia
46 Portland Street, Suite 601 Dartmouth, Nova Scotia B2Y 1H4
PHONE: (902) 423-2850 FAX: (902) 423-2834 E-Mail: matt@ldans.ca

Please send me a tax receipt for \$75 per ticket.
Official Registration No. 0775924-11

Thank you so much for your support!



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Association of Nova Scotia

The right to learn, the power to achieve