

Member Get Member 2006 Event

Celebrating 25 years of Service in the Community

RESERVATION ORDER FORM

YOUR NAME

COMPANY NAME

ADDRESS

CITY

PROVINCE

POSTAL CODE

TEL (BUS)

TEL (HOME)

EMAIL

**PLEASE RESERVE BY
(MAY 26TH)**

MEMBER W / NEW MEMBER **FREE**
(ATTACH MEMBERSHIP FORM)

PLEASE RESERVE _____ TICKETS

MEMBER \$35.00

NON-MEMBER \$40.00

PEASE RESERVE _____ TICKETS

PEASE RESERVE _____ TICKETS

PAYMENT INFORMATION

VISA

CARD #

EXPIRY DATE

NAME ON CARD

SIGNATURE

TOTAL AMOUNT CHARGEABLE

CHEQUE (PAYABLE TO FPCBP)

Fax Reservation to FPCBP 416 537 9706 or Email to info@fpcbp.com