

Finnland's INDEPENDENCE DAY



Gala

Name: _____

Address: _____

Telephone: _____

E-mail: _____

Number of tickets @ \$150.00 each _____

Total payable to **CFF Education Foundation** \$

Tax receipt should be made out to: _____

Please list on the back the names of people you are buying tickets for and also whom you would like to be seated with.

Please use return envelope and mail to: Finnish Credit Union Ltd., 191 Eglinton Ave. East, Toronto, ON M4P 1K1, Attn. Helena Ahola

List names of people for whom tickets are being bought with this order form.

Each table seats ten people. If you would like to be seated with someone who is not listed on the left of this page, please write their name below.

