



Friday, November 5, 2010
Cunard Centre (Pier 23)

6:00 Reception
7:00 Dinner
Formal (Black Tie optional)

Table & Ticket Confirmation Form

Name: _____
(Please print clearly)

Organization: _____
(Indicate the name you would like to appear on the seating chart)

Address: _____
(Full address required to ensure receipt of your tickets)

City: _____ Prov: _____ Postal: _____

Phone: _____ Fax: _____

Please Reserve: _____ *table(s) at \$2000 (tables of 10)*

_____ *ticket(s) at \$200 each*

Payment Options:

Please invoice me at the address above

Please process payment on the following Credit Card:

Visa: MC: AMEX: #: _____ Exp: _____

Please fax back to the attention of Jennie Ewert at (902) 473-7491

Thank you for your support! Your tickets will be sent to you closer to the event date.

QEII FOUNDATION

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