

## SPONSORSHIP SIGN UP FORM

Please complete and fax with Form to: ORCA at (905) 829-1594.

Company: \_\_\_\_\_ (as it should appear in print)

Contact: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ P/Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### Workshop(s) Selected:

Code \_\_\_\_\_ Name: \_\_\_\_\_

Code \_\_\_\_\_ Name: \_\_\_\_\_

Code \_\_\_\_\_ Name: \_\_\_\_\_

Code \_\_\_\_\_ Name: \_\_\_\_\_

Code \_\_\_\_\_ Name: \_\_\_\_\_

Quantity: \_\_\_\_\_

**Cost: Each Workshop: \$325**  
**Two - Four: \$300 Each**  
**Five or more: \$275 Each**

**Add: 13% HST (HST # 82797 5293 RT0001)**

### METHOD OF PAYMENT

**Cheque Enclosed:** Please make payable to: ORCA Convention 2012  
Mail to: 2390 Bristol Circle, Unit # 6, Oakville, ON L6H 6M5

**Visa / MasterCard Payment:** Fax to ORCA (905) 829-1594

Card No: \_\_\_\_\_ Expiry Date: \_\_\_\_/\_\_\_\_ Amount \_\_\_\_\_

Name on Card: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Questions? Contact Vera Shewell at [vera@orcaretirement.com](mailto:vera@orcaretirement.com)

See you at the show!