

UKRAINIAN CATHOLIC FOUNDATION OF SASKATCHEWAN

Harvest Moon Gala – Saturday October 24, 2026

**TICKET PURCHASE FORM**

**Date of Ticket Purchase:** \_\_\_\_\_, 2026

\_\_\_\_\_ Dinner Tickets (\$125.00 Per Ticket): Quantity: \_\_\_\_\_ Total \$ \_\_\_\_\_

\_\_\_\_\_ Dinner Tickets – Table of 8 Tickets: Quantity: 8 Tickets Total \$1000.00

**Purchaser of Ticket(s):** \_\_\_\_\_

(If different than one of the Attendees)

**Address:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_: **Province:** \_\_\_\_\_: **Postal Code** \_\_\_\_\_

**Telephone:** \_\_\_\_\_: **Email:** \_\_\_\_\_

**Payment Method: Credit Card**

Name on the Credit Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Card Expiry Date: (mm/yyyy) \_\_\_\_\_ CVC: \_\_\_\_\_

**Payment Method: Other**

\_\_\_\_\_ e-Transfer: \_\_\_\_\_ Cheque: \_\_\_\_\_ Cash

**CHARITABLE RECEIPT INFORMATION**

**Issue Charitable Receipt To:**

- Ticket Purchaser Only: \_\_\_\_\_; To Each individual Attendee: \_\_\_\_\_
- Special Instructions (if any) \_\_\_\_\_  
\_\_\_\_\_

**OTHER PERTINENT INFORMATION**

Access to Tickets: Mail Tickets: \_\_\_\_\_ Pick up at Event: \_\_\_\_\_

Table Logistics/Accompanying Guests:

**OFFICE USE:**

- Tickets Mailed Out: \_\_\_\_\_, 2026: Ticket to be Picked up at the Event: \_\_\_\_\_
- Charitable Receipt Issued and Mailed Out: \_\_\_\_\_, 2026

NAME OF ATTENDEES:

|                                                                                                                                                          |                                                                                                                                                          |
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| <b>Attendee #1</b><br>Name _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code: _____<br>Telephone: _____; _____<br>Email: _____ | <b>Attendee #2</b><br>Name: _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code _____<br>Telephone: _____; _____<br>Email: _____ |
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| <b>Attendee #3</b><br>Name _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code: _____<br>Telephone: _____; _____<br>Email: _____ | <b>Attendee #4</b><br>Name: _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code _____<br>Telephone: _____; _____<br>Email: _____ |
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| <b>Attendee #5</b><br>Name _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code: _____<br>Telephone: _____; _____<br>Email: _____ | <b>Attendee #6</b><br>Name: _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code _____<br>Telephone: _____; _____<br>Email: _____ |
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| <b>Attendee #7</b><br>Name _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code: _____<br>Telephone: _____; _____<br>Email: _____ | <b>Attendee #8</b><br>Name: _____<br>Address: _____<br>City/Town: _____<br>Province: _____: Postal Code _____<br>Telephone: _____; _____<br>Email: _____ |
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