

Sydney Alzheimer Research Awareness Breakfast

Wednesday, January 6, 2016 **NEW LOCATION**: Membertou Trade & Convention Centre Sydney, Nova Scotia 7:00 a.m. – 9:00 a.m.

Doors open at 6:45 a.m.

Open seating

Please print and fill out completely. The Alzheimer Society of Nova Scotia will be sending tickets to each registered guest. Please provide your email address so the Society can email your ticket and save on postage. If you don't have an email address, the Society will send your tickets in the mail. Tickets are required for entrance to breakfast.

Name:		
Organization:		
Address:		
Phone:	Fax:	Email:
REGISTRATION OPT	IONS: Please check all tha	at apply and fill in information where applicable.
☐ I would like to pu	ırchase individual :	seat (s) at \$35 for a total of
☐ I would like to pu	rchase parties of 2	10 at \$350.
☐ I would like to pu	rchase and donate	seats to volunteers
☐ I am a registered	Society member and wou	ıld like to purchase individual seats at \$30
Please specify the to	otal amount enclosed / due	e \$
Do you have any alle	ergies or specific dietary re	estrictions? Please specify
PAYMENT METHOD		
☐ Cheque/ Money o	order enclosed (please ma	ke cheque payable to the Alzheimer Society of Nova Scotia)
□ I prefer to charge	my □ Visa □ MasterCard	
Card Number:		Expiry Date:
Name on Card:		
Cardholder Signatur	e:	
Invoice to:		
Contact Name and F	Phone Number:	

RETURN FORM AND PAYMENT TO:

Alzheimer Society of Nova Scotia 112-2719 Gladstone Street Halifax, NS B3K 4W6 Tel: 902 422-7961 or 1-800-611-6345 Fax: 902 422-7971

Email: alzheimer@asns.ca