SOUTHLAKE
REGIONAL HEALTH CENTRE
FOUNDATION

To Order Raffle Tickets

I would like to support the Southlake Regional Health Centre Foundation

Number of tickets: _____ ($25 each) I wish to donate: $ _____ I would like to help sell tickets, please contact me ☐

Name: _____

Address: _____ City: _____ Prov: _____ Postal Code: _____

Phone: Bus. ( ) _____ Res. ( ) _____ Email: _____

Method of Payment

Cheque ☐ MC ☐ Visa ☐ Amex ☐

** Please make cheques payable to: Southlake Regional Health Centre Foundation (Business #13179 7540 RR0001)*

Name on Card: _____

Card #: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry: ☐☐/☐☐

Please return by mail or fax to 905-836-5651

Southlake Regional Health Centre Foundation
615 Davis Dr., Suite 304, Newmarket, Ontario L3Y 2R2
www.southlakeregional.org

Questions, please call
905-836-7333 ext.228 or
Toll Free: 1-877-457-2036