



## OUR VOICE CONCERT

CONTACT:	
ADDRESS:	
EMAIL:	
PHONE:	
OUR VOICE TICKET <b>\$20 EACH TICKET</b>	PLEASE INDICATE HOW MANY TICKETS YOU WOULD LIKE:
DONATION AMOUNT	PLEASE INDICATE IF YOU WOULD LIKE TO MAKE A DONATION: ONE TIME DONATION   MONTHLY DONATION ( <i>CIRCLE ONE</i> ) \$ _____
TOTAL AMOUNT:	
METHOD OF PAYMENT PLEASE CIRCLE ONE:	VISA      MASTERCARD      CHEQUE      CASH
NAME ON CARD:	
CARD NUMBER:	
EXPIRY DATE:	

Please fill out the form and send to [ourvoiceconcert@gmail.com](mailto:ourvoiceconcert@gmail.com)

If you have any questions please contact Anni or Luchie

Anni: 647-883-1923

Luchie: 647-655-3524