



**ST. ALPONSUS SCHOOL  
GALA 36 – DINNER AND DANCE  
SATURDAY, APRIL 25, 2026  
DELTA HOTEL  
SPONSOR ORDER FORM**

Company/Individual Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Tax Receipt Issued to: \_\_\_\_\_

Name to appear on Sponsor acknowledgement: \_\_\_\_\_

**SPONSOR LEVEL – Please check one of the following**

**HOST SPONSOR \$10,000.00**

Diamond Level (10 Tickets) \$5,000.00

Platinum Level (8 Tickets) \$3,000.00

Gold Level (6 Tickets) \$1,900.00

Silver Level (4 Tickets) \$1,200.00

Bronze Level (2 Tickets) \$650.00

Evergreen Level (no Tickets) \$250.00

**Payment Method**

Cheque      Credit Card      e-Transfer      Payment amount of \$ \_\_\_\_\_

\*Please make cheques payable to “St. Alphonsus Gala Dinner”

\*e-Transfers can be sent to [galapayments@stals.ca](mailto:galapayments@stals.ca)

**Payment Plan Options**

Please choose the # of payments (max 4) and divide by the sponsorship amount

Number of Payments: \_\_\_\_\_ Each Payment Amount: \$ \_\_\_\_\_

Please check off payment plan dates below:

January 31, 2026

February 15, 2026

March 15, 2026

April 15, 2026

\*Please make post dated cheques out to “St. Alphonsus Gala Dinner” for the above selected dates

**Credit Card Information**

Visa/Mastercard Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

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

First Gala Attending? Yes or No

Referred By



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**GUEST LIST**

**PURCHASE INFORMATION**

Company/Individual Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Sponsorship Level (if applicable): \_\_\_\_\_

**GUEST NAMES (INCLUDING PURCHASER)**

Name of Guest	Dietary Restrictions/Allergies

**ADDITIONAL INFORMATION**

Please seat us with \_\_\_\_\_