



Vic High Auditorium Seat Plaque ORDER FORM



Name: _____
 Address: _____
 City / Prov. _____
 Postal Code: _____
 Phone #: _____
 Email: _____

Seat: Floor ___ Section _____ Row ___ Seat _____

Plaque Wording:

Line 1 Bold, up to 20 char. Regular, up to 25 char.

Line 2: Bold, up to 20 char. Regular, up to 25 char.

Line 3: Bold, up to 20 char. Regular, up to 25 char.

Please send your cheque for \$200, which includes taxes, to the address below. Your cheque will not be deposited until after we contact you and you approve a proof of your seat-plaque.

Questions? Call Keith at (250) 588-5062