APPM Gala Sponsorship



Company or Individual Name:	
	Title:
Address:	City:
Postal Code: Tel	
Fax: Em	ail:
Referred by:	
I would like to contribute as: ALPHA Partner \$10 Education Partner Peace Partner \$20 Academic Resear Curriculum Partner	\$50,000 0,000 rch Partner \$10,000
Payment method: Cheque (payable to ALPHA Education) Mail your form and cheque to 1775 Lawrence Ave E, Scarborough, ON M1R 2X7 E-Transfer to donation@alphaeducation.org Email your form to info@alphaeducation.org; or Mail your form to 1775 Lawrence Ave E, Scarborough, ON M1R 2X7	
Please issue the official tax receipt to: Tax Recipient Email:	

For more information and inquiry, please call 416-299-0111 or e-mail to info@alphaeducation.org Charitable Number: 85110 5361 RR0001

Contributions & Partnerships



APPM Gala

Date: Sunday, June 09, 2024

Venue: Parkview Manor, 55 Barber Green Road, North York, ON M3C 2A1

ALPHA Partner - \$100,000

30 benefactor tickets with tax receipt amount of \$97,000

Education Partner - \$50,000

20 benefactor tickets with tax receipt amount of \$48,000

Peace Partner - \$20,000

10 benefactor tickets with tax receipt amount of \$19,000

Academic Research Partner - \$10,000

10 benefactor tickets with tax receipt amount of \$9,000

Curriculum Partner - \$5,000

5 benefactor tickets with tax receipt amount of \$4,500