

Annual
Benefit
Dinner
May 28,
2026

I/we will be attending the event:

Individual Tickets \$200 x _____ = \$ _____

Table of 10 \$2,000 x _____ = \$ _____

I/We are unable to attend, but wish to make a donation:

\$ _____ (An official donation tax receipt will be mailed.)

2026 Donor Circle Levels:

Circle of Healing \$10,000 x _____ = \$ _____ (10 guests)

Circle of Hope \$5,000 x _____ = \$ _____ (10 guests)

Circle of Care \$2,500 x _____ = \$ _____ (5 guests)

Circle of Friends \$1,000 x _____ = \$ _____ (2 guests)

Please
RSVP by
May 08,
2026

Name as you would like it to appear in the Donor Circle listing in the program.

(The non-tax-deductible portion of each ticket is \$100.)

For more information, including sponsorship opportunities please contact **Housai Rahimi**, Manager of Mission Communications and Human Resources
The Southdown Institute
Tel: **905 727 4214, ext. 104**,
or email: **events@southdown.on.ca**.

Thank you for supporting
our
Annual Benefit Dinner 2026

Scan to pay by credit card.



SOUTHDOWN CHARITABLE
REGISTRATION #:
101630820 RR0001

First and Last Name

Organization Name

Address

City

Province/State

Postal/Zip Code

Country

Phone

Email

To pay by cheque (*payable to The Southdown Institute*):

Mail your payment and this completed form, using the return envelope provided, or addressed to:

The Southdown Institute

Attn.: Housai Rahimi

18798 Old Yonge St

Holland Landing, ON L9N 0L1 Canada

To pay by credit card:

Visit **www.southdown.on.ca**, and follow the link for payment by credit card, or scan the QR code provided.