



38th Annual Sons & Daughters of Italy Gala Dinner

Dinner Ticket and Sponsorship Order Form
Saturday, March 14, 2026



Contact Information

All fields are required to be filled

Seller: _____

Name: _____

Company: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Fax: _____ ☐ Sons and Daughters of Italy member

Email: _____

Sponsorship Opportunities

<input type="checkbox"/>	Entertainment Sponsor	\$ 30,000	\$ _____
<input type="checkbox"/>	Diamond or Heart of the Lion Sponsorship	\$ 30,000	\$ _____
<input type="checkbox"/>	Dinner Sponsorship	\$ 25,000	\$ _____
<input type="checkbox"/>	Signature Sponsorship	\$ 20,000	\$ _____
<input type="checkbox"/>	President's Reception Sponsorship	\$ 15,000	\$ _____
<input type="checkbox"/>	VIP Reception Sponsorship	\$ 15,000	\$ _____
<input type="checkbox"/>	Auction Sponsorship	\$ 10,000	\$ _____
<input type="checkbox"/>	Volunteer Sponsorship	\$ 10,000	\$ _____
<input type="checkbox"/>	Pin/Souvenir Sponsorship	\$ 10,000	\$ _____
<input type="checkbox"/>	Platinum Sponsorship	\$ 10,000	\$ _____
<input type="checkbox"/>	Gold Sponsorship	\$ 8,500	\$ _____
<input type="checkbox"/>	Silver Sponsorship	\$ 7,000	\$ _____
<input type="checkbox"/>	Corporate Sponsorship	\$ 5,000	\$ _____
<input type="checkbox"/>	Corporate Powerpoint Slide	\$ 1,500	\$ _____
<input type="checkbox"/>	Corporate Powerpoint Slide with Sponsorship	\$ 750	\$ _____

Tickets

<input type="checkbox"/>	Individual Tickets	\$ 350.00 x _____	\$ _____
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Program Participation

<input type="checkbox"/>	Full Page	\$ 1500	\$ _____
<input type="checkbox"/>	Half Page	\$ 850	\$ _____
<input type="checkbox"/>	Quarter Page	\$ 500	\$ _____
<input type="checkbox"/>	Design of Advertisement	\$ 300 (Basic 1/4 page) Custom ads to be quoted	\$ _____
<input type="checkbox"/>	Donation towards Gala Event	\$ _____	\$ _____

Total Payment Due: \$ _____

Payment

Please send this form completed to: **1055 Wilkes Avenue, Winnipeg, MB R3P 2L7 or by email to dinneradmin@sonsofitaly.ca**

With payment payable to: **Sons & Daughters of Italy**

☐ Cheque ☐ Visa ☐ Mastercard

Credit Card Number:

(Credit card payments are available for purchases \$7000 and under)

_____-_____-_____-_____-_____-_____-_____-_____-

Expiration Date (MM/YY):

____/____

Name on Card:

CID

Signature:

Contact

All inquiries regarding ticket purchases, event questions, payments/billing questions, dietary and seating requirements should be directed by email to dinneradmin@sonsofitaly.ca.