

Support New Beginnings at their 3rd Annual

# PROSPERITY BALL

Improving lives one family at a time



Hosts  
**The Wine Ladies**



Special Guest Speaker  
**The Honourable Gerard Kennedy**



Legendary Singer & Songwriter  
**Liberty Silver**



Performace by Juno Nominee  
**Sarina Paris**

## Recovery Efforts Fundraiser

**Saturday November 27th, 2010**

Pantages Hotel | 200 Victoria St | Toronto

**6 pm Cocktails**

**7 pm Dinner**

Silent & Live Auction, Entertainment

\$125 per person | \$875 per table

For tickets & information visit [www.newbeginningsprogram.ca](http://www.newbeginningsprogram.ca)

Presented by **Liberty Silver** and **Women in Construction**

  
new beginnings  
support program



Designed by : [catunto creative](http://catuntocreative.com)



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## THANK YOU TO OUR GENEROUS SPONSORS!





# PROSPERITY BALL RECOVERY FUNDRAISER TICKET FORM

NOVEMBER 27, 2010 – 6:00 PM  
PANTAGES HOTEL – 200 VICTORIA ST | TORONTO, ON

For more information please contact:  
416-260-8465 | tickets@newbeginningsprogram.ca

PLEASE RETURN FORM BY FAX TO 1 (866) 383-2861 OR BY E-MAIL TO tickets@newbeginningsprogram.ca

\_\_\_ TICKET(S) X \$125 = \_\_\_      \_\_\_ TABLE(S) OF 8 X \$875 = \_\_\_

Contact Person: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov: \_\_\_\_\_ PC: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## METHOD OF PAYMENT

CHEQUE *Please make cheques payable to New Beginnings Support Program*

VISA

MASTERCARD

AMERICAN EXPRESS

Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Cardholder: \_\_\_\_\_

Billing Address:  SAME AS ABOVE \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ PC: \_\_\_\_\_

Signature: \_\_\_\_\_

*Thank you for helping us, help others!*

Please join us in making a difference in the lives of these families! We thank you in advance for your support.



# PROSPERITY BALL RECOVERY FUNDRAISER TABLE FORM

PLEASE RETURN FORM BY FAX TO 1 (866) 383-2861  
OR BY E-MAIL TO [tickets@newbeginningsprogram.ca](mailto:tickets@newbeginningsprogram.ca)

PLEASE PROVIDE THE FIRST & LAST NAME OF EACH GUEST INCLUDING THEIR E-MAIL ADDRESS FOR  
CONFIRMATION AND EVENT DETAILS.

1. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
2. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
3. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
4. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
5. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
6. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
7. **First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_  
**E-mail Address (for confirmation):** \_\_\_\_\_
  
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