

Enchanted CAR PASS

CHRISTMAS GIFT PACKS



The perfect Christmas present for your Customers and Staff!

One Pass admits a maximum of 7 passengers per vehicle (\$10 for every additional passenger)

Number of Enchanted Car Passes: _____ (minimum order of 50) x \$25.00/pass = \$ _____

Contact Name: _____

Business/Organization: _____

Mailing Address: _____

Postal Code: _____ Telephone: _____

Delivery Address (If different than above): _____

Email: _____ Order Date: _____

Payment Method:

☐ Invoice ☐ We will mail a Cheque for \$ _____ payable to The Enchanted Forest

☐ We authorize payment by Credit Card (Please print clearly below) OR to pay by phone call **Ian Frias**,
Director of Finance, Saskatoon City Hospital Foundation 306-655-8314

Card # _____ 3 Digit CVC # _____

Cardholder Name: _____ Expiry Date: _____

Signature: _____

Please complete form and return by email to Lesia Sorokan Normand, marketing@enchanted-forest.org

Send cheques directly to:

The Enchanted Forest c/o Saskatoon City Hospital Foundation, 701 Queen Street, Saskatoon SK, S7K 0M7



For more information contact **Marketing Director, Lesia Sorokan-Normand**

E: marketing@enchanted-forest.org | C: 306-229-9420