



2025 INDUCTION CELEBRATION

TICKET APPLICATION FORM

Please reserve _____ “Gala Tickets” at \$400.00* each for a total of \$_____.

Please reserve _____ “Galleria Seating Tickets” at \$600.00* each for a total of \$_____.

Name & Company: _____

Address: _____

City: _____

Prov/State: _____

Postal/Zip: _____

Email: _____

Telephone: () _____

Please make cheque payable to **HOCKEY HALL OF FAME** or include your credit card info below:

VISA

Credit Card No.: _____ Expiry: ____/____

MASTERCARD

Cardholder’s Signature: _____

AMEX

* Official Donation Receipts (for income tax purposes) will be issued for the eligible charitable portion (50%) of the ticket price upon request.

Yes, please issue an Official Donation Receipt. No, thank-you.

Please issue Official Donation Receipt to: _____

Event Date: Monday, November 10, 2025 • Doors open at 5:30 PM • Ceremony at 7:30 PM

Venue: Hockey Hall of Fame, Brookfield Place, 30 Yonge Street, Toronto

Dress: Business Attire

Send application to: Hockey Hall of Fame, Brookfield Place, 30 Yonge Street, Toronto, ON, M5E 1X8
or via fax to 416-360-1501. Attention: Sarah Tuskey Tel: 416-933-8237.

Due to limited availability, Hockey Hall of Fame may not fulfill all ticket requests.
Approved ticket orders will be confirmed on or about September 15, 2025. No refunds.