

GUEST DETAILS GRID

Please fill in the below grid (or copy and paste into an email) and send to Visions@islandhealth.ca before October 24, 2026.

If you are still finalizing your guest list, or something changes leading into the event, please feel free to send us new names as they are confirmed. If you don't have all the information, such as dietary restrictions, please provide what you can and advise if you would prefer that our team follow up with them directly. Please fill in the grid based on the number of guests you are inviting. If you have a full table, please fill them in the order you'd like everyone to be seated

<i>#</i>	<i>First Name</i>	<i>Last Name</i>	<i>Email Address</i>	<i>Phone #</i>	<i>Mailing Address</i>	<i>Dietary Restrictions</i>
1						
2						
3						
4						
5						
6						
7						
8						
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10						

These details will help us to provide your guests with important information (eg. arrival times, parking instructions, etc.) accommodate their dietary restrictions, register them for our online auctions, send applicable tax receipts, and give them access to our post-event online photo gallery.

VISIONS

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11						
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24						

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