



Ticket Request Form

Thursday, June 12, 2025
Grand Jamaica Suite, Jamaica Pegasus Hotel
Cocktails at 6:30pm; Dinner at 8:00pm

Name of Company: _____

Company Address: _____

Name of person requesting ticket(s): _____

Job Title/Position: _____

Tel.: _____ Email: _____

Please select the number of ticket(s) being requested.

- ☐ Individual: \$30,000 + GCT Amount of Ticket(s): _____
- ☐ Table of 8: \$232,000 + GCT
- ☐ Table of 10: \$285,000 + GCT

Total Due: \$ _____ + GCT

Please specify any dietary restrictions (*N.B. Menu contains lamb, fish and dairy products)

Tickets will only be issued upon receipt of payment or an official purchase order.
All tickets and invoices will be sent directly to the individual who submitted the request.

Kindly be advised that written cancellations must be received by Monday, June 9, 2025.
Failure to do so will result in the entity or individual being billed for the requested ticket(s).

To secure your tickets, please submit the completed form to Thasya Chin-Fletcher via email at thasya.cfletcher@jamaicachamber.org.jm.
For any inquiries, please contact Thasya at 876-229-0388.

Authorized Name: _____ Signature: _____

Date: _____ of _____, 2025
(Day) (Month)