



WE'RE NOT STOPPING
OUR FIGHT ISN'T OVER
#NOBRAKES

DONATION FORM

Completed forms and donations must be returned by September 28, 2018 to the QEII Foundation
(Park Lane Mall: 5657 Spring Garden Road, M3, Park Lane Terrace)

Mail cheques to: **QEII FOUNDATION 5657 Spring Garden Road Park Lane Mall, Suite 3005, Halifax, Nova Scotia B3J 3R4**

*= mandatory information. Must provide full mailing address in order for tax receipt to be issued.
(Please note: As per CRA rules, tax receipts will NOT be issued for team/general fundraising – i.e. bake sales, ticket sales, casual days, etc.)

DONOR INFORMATION

Title: _____ First name: * _____ Last name: * _____
Company name (for corporate donations only): _____
Email: * _____ Phone #: * _____
Number, Street, Apt/Suite: * _____
City, Province: * _____ Postal Code: * _____
Name of Participant or Team Being Pledged: _____
Donation Amount: * \$25 \$40 \$50 \$75 \$100 Other: _____

ONLINE RECOGNITION

Yes, I want my name to appear in the Honour Roll featured on the participant's/team's web page.

Yes, I want my donation amount to be included under my name in the Honour Roll.

METHOD OF PAYMENT*

Cash (enclosed) Cheque (enclosed) Credit card (all remaining fields are mandatory)
(Please note: Please make cheques payable to "QEII Foundation - Ride for Cancer")

CREDIT CARD INFORMATION

Card type: Visa MasterCard American Express Discover
Card number: _____ Expiry Date (mm/yy): _____
Cardholder name: _____ Signature: _____
Billing Address (if different than address listed above)
Number, Street, Apt/Suite: * _____
City, Province: * _____ Postal Code: * _____