

DONATION FORM

Completed forms and donations must be returned by September 27, 2019 to the QEII Foundation
(Park Lane Mall: 5657 Spring Garden Road, M3, Park Lane Terrace)

*= 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 and amount to appear in the Honour Roll featured on the participant's/team's web page.
 Yes, I wish to remain anonymous on the participant's webpage

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:* _____