

DONATION FORM

This form <u>must</u> be attached to the cheque or cash being sent to the mailing address below. Note: INFORMATION MUST BE COMPLETE AND LEGIBLE TO RECEIVE A TAX RECEIPT. TAX RECEIPTS WILL BE ISSUED FOR DONATIONS OF \$20 OR MORE.

Individual 🗆 Company 🗆

Full Name:				
(For individual donations, this is t	he name that will o	appear on the ta	x receipt)	
Legal Company Name: (for corporate donations)				
Email:				
(to receive your tax receipt by em	nail)			
Address:				
City:				
Province:	Postal Code:			_Tel:
l support a participant 🛛	l support a	a team 🗆	I support the ev	ent 🗆
mail:				
		□ \$500	□ \$1000	Other:
We recognize those who donate :	\$500 or more in o	ır publications. (Check here if you wish	to remain anonymous. 🛛
Payment options:				
Cheque: Make-A-Wi	ish Canada			
Note: Credit card donations	can be made direc	tly online at: w	ww.trailblazeforwishe	es.ca
		PLEASE	MAIL TO:	

Make-A-Wish Canada 1101 Kingston Rd, Suite 350, Pickering, ON L1V 1B5

4211 Yonge Street, Suite 520, Toronto, ON M2P 2A9 1-888-822-9474

nationalevents@makeawish.ca

Charitable Registration Number: 881291918 RR 0001

Internal Use : AB - 985