

## **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 a	ppear on the ta	x receipt)	
Legal Company Name: (for corporate donations)				
Email:				
Email:	ail)			
Address:				
City:				
Province:		l Code:		_Tel:
I support a participant □ I sup		team 🗆	I support the event $\Box$	
Name of participant or tear	n:			
Please accept my donation □ \$50 □ \$100		□ \$500	□ \$1000	Other:
We recognize those who donate :	\$500 or more in ou	r publications. C	Check here if you wish	to remain anonymous. 🛛
Payment options:				
Cheque: Make-A-Wi	sh Canada			
Note: Credit card donations	can be made direct	ly online at: ww	ww.trailblazeforwishe	es.ca
		PLEASE	MAIL TO:	

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

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nationalevents@makeawish.ca

Charitable Registration Number: 881291918 RR 0001

Internal Use : BC - 984