

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					
Legal Company Name: (for corporate donations)					
Email:	ail)				
(to receive your tax receipt by em	(all)				
Address:					
City:					
Province:		al Code:		_Tel:	
l support a participant 🛛	l support a	I support a team \Box		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 s	\$500 or more in οι	ır publications. (Check here if you wish	to remain anonymous. 🛛	
Payment options:					
Cheque: Make-A-Wi	sh 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 : NS - 992