

**Donor information (please print or type)**

Name :

Address :

City :

Province/State :

Postal Code/ Zip :

Telephone (home) :

Telephone (business) :

Fax :

E-mail :

**Pledge information**

I (we) pledge a total of \$  for

I (we) plan to make this contribution in the form of :

- Cheque
- Credit Card

Credit Card type :

Credit Card Number :

Credit Card Expiration Date : MM :  / YY :

Authorized signature :

**Acknowledgement information**

Please use the following name(s) in all acknowledgements :

I (we) wish to have our gift remain anonymous.

Signature :

Date (DD/MM/YYYY) :