



Event: _____

DONATION FORM

Date: _____

YOUR INFORMATION

Name: _____
(first name) (last name)

Address: _____

City: _____ Prov: _____ Postal Code: _____

Phone Number: _____ Email: _____

Would you like a tax receipt? Yes No
(minimum \$20)

I would like to receive information about Fraser Valley Humane Society events?

DONATION DETAILS

Donation is in **Celebration** of: _____

Donation is in **Memory** of: _____

If this donation is in Celebration of or in Memory of, do you wish an acknowledgement sent to the family? Yes No If **Yes**, the acknowledgement is to be sent to:

Name: _____
(first name) (last name)

Address: _____

City: _____ Prov: _____ Postal Code: _____

PAYMENT OPTIONS

In Person Via Mail By Phone Donation amount: \$ _____

Cash Debit Visa MasterCard Cheque # _____

Name as it appears on credit card: _____

Expiry date: _____ / _____ VIN # _____ (for phone requests only)

Cardholder Signature: _____

Thank you. Your donation will make a difference!

OFFICE USE ONLY:

Receipt issued # _____ Date mailed: _____

Thank you card Sympathy card Other: _____

Date sent: _____