



PARALYMPIC
FOUNDATION

PARALYMPIC FOUNDATION OF CANADA

DONATION FORM

I would like to make a donation to the Paralympic Foundation of Canada
Registered charitable organization number: 813904190RR0001

Donation Information

One-time donation (amount) \$CDN _____
or
Recurring monthly donation \$CDN (Billed to credit card) _____

Contact Information

Name _____
Address _____
City _____
Province _____ Postal Code _____
Email _____
Phone _____

Payment Information

Cheque (enclosed) made payable to:
"Paralympic Foundation of Canada"

Visa Mastercard
Name on card _____
Card number _____
Expiry Date (MM/YYYY) _____

I consent to receive email communications from the Paralympic Foundation of Canada regarding its programs, events, and athletes:

YES NO

Please return this form, completed, to:
Paralympic Foundation of Canada
100-85 Plymouth Street, Ottawa, ON K1S 3E2 Fax : 613 569 2777