

### I would like to make a one time donation:

- ☐ My cheque (made payable to Neil Squire Society) is enclosed
- ☐ Please charge my credit card (see below)
- ☐ Amount of donation \_\_\_\_\_

### I would like to make a pledge:

- ☐ I would like to contribute \$ \_\_\_\_\_ monthly for \_\_\_\_\_ months.
- ☐ I would like to contribute \$ \_\_\_\_\_ annually for \_\_\_\_\_ years.
- ☐ I would like to start my contribution on (dd/mm/yy) \_\_\_\_\_

### I would like to become an annual donor by:

- ☐ Building Hope: \$500 per year for 5 years
- ☐ Creating Opportunities: \$1,000 per year for 5 years
- ☐ Making a Difference: \$5,000 per year for 5 years
- ☐ Changing Lives: \$10,000 per year for 5 years

#### Donor Information:

Name \_\_\_\_\_ Company (if applicable) \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email address \_\_\_\_\_

#### Payment Information:

- ☐ My cheque (payable to Neil Squire Society) is enclosed
- ☐ Please charge my Visa / MC # \_\_\_\_\_ Expiry \_\_\_\_\_
- ☐ I authorize any donor recognition related to this contribution
- ☐ Please do not publish my name, I wish to be an anonymous donor

Donor Signature \_\_\_\_\_



**Thank you for your generosity!**

Charitable tax # 864366174 RR0001