



KAMLOOPS AND DISTRICT

Elizabeth Fry Society



Donation Form

I would like to support Kamloops and District Elizabeth Fry Society by making a:

- Personal donation
- Corporate donation

Donation of:

- Monthly* gift of:
 - \$10
 - \$20
 - \$30
 - \$50
 - \$100
 - Other \$ _____
- Make my donation on the:
 - 1st or
 - 15th of each month

- One-time donation of:
 - \$50
 - \$100
 - \$250
 - \$500
 - Other \$ _____

I would like my contribution to go to:

- Area of Greatest Need
- Family Stepping Stones
- Women's Educational Bursary

Mr. Ms. Mrs. Miss Dr.
 First Name: _____ Last name: _____
 Address _____ City _____ Postal Code _____
 Phone: (_____) _____ - _____ Email: _____

I would like to pay by:

- Cheque payable to Kamloops and District Elizabeth Fry Society
- Visa Card no: _____ / _____ / _____ / _____ Expiry date: _____ / _____
- Mastercard Signature: _____ 3-digit security code (CVC): _____

- Please do not list me as a donor in Kamloops and District Elizabeth Fry Society Annual Reports or donor recognition projects
- Please send me Kamloops and District Elizabeth Fry Society's quarterly email newsletter
- I would like to learn more about becoming a member of Kamloops and District Elizabeth Fry Society
- I would like to learn more about volunteer opportunities at Kamloops and District Elizabeth Fry Society
- I would like to learn about including Kamloops and District Elizabeth Fry Society in my will

Please feel secure. We only use your personal information to provide services and to keep you informed and up to date on the activities of Kamloops and District Elizabeth Fry Society including programs, services, special events, funding needs, opportunities to volunteer or to give, and more through periodic contacts. If at any time you wish to be removed from any of these contacts simply contact us by phone at 250-374-2119 or at admin@kamloopsefry.com.

We do not trade or sell our donor lists.

Tax receipts will be issued for donations of \$20 or more unless otherwise requested.

*For monthly donations by cheque, please send a cheque marked "void" and this completed card by mail. Your charitable receipt will include all monthly donations made, to Dec. 31st for each calendar year. You can increase, decrease, cancel or restart your monthly donation at any time by notifying us at 250-374-2119.

Thank you!

Please send your completed form to our office at the address below:

Kamloops and District Elizabeth Fry Society
827 Seymour Street
Kamloops, BC V2C 2H6

Tel: 250-374-2119
Fax: 250-374-5768
Email: admin@kamloopsefry.com

Charitable Business # 107556086 RR0001

www.kamloopsefry.com