



DONATION FORM

PERSONAL INFORMATION

Name (Mr./Mrs./Ms.) _____

Address: _____

Street

Apt./Suite

City

Prov.

Postal Code

Telephone: (day) _____ (evening) _____

Email: _____

- Please check here if you do NOT wish to receive mailings and/or emails from The Darling Home for Kids including campaign updates, newsletters, fundraising appeals and information on upcoming events.
 Please check here if you do NOT wish your gift to be recognized in the Homefront Newsletter.

DONATION OPTIONS

Please select gift amount: \$35 \$55 \$80 \$100 Other \$ _____

Donation Type:

- One time gift
 Monthly Donation* on the _____ of each month.
 Annual Donation* on _____

*On-going donations may be cancelled at any time.

PAYMENT INFORMATION

Visa/MasterCard # _____ Exp _____

Name on Card _____ Signature _____

Cheque (Payable to The Darling Home for Kids)

Charitable tax receipts are issued for gifts of \$15 or more unless requested

This donation is made in honour of in memory of _____

Please Send Acknowledgement Card To:

Name (Mr./Mrs./Ms.) _____

Address: _____

Street

Apt./Suite

City

Prov.

Postal Code

Personal Message to include in the card: _____

- Please include my name and address in the card.
 I give The Darling Home for Kids permission to disclose the amount of my gift in the card.

Please print this form and mail it to:

The Darling Home for Kids

5657, 15th Side Road • Milton, ON • L9T 2X7

Or fax it to: (905) 878-9886