



2024 DONATION FORM

Thank you for donating to Tour de Cure presented by Wheaton Precious Metals, benefiting BC Cancer Foundation.

WHO ARE YOU DONATING TO? Nigel mitchell 1067				Please mail this form or drop off with your donation to this address:	
Nigel mitche	II	Participant number			BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO	APPEAR ON YOU	R TAX RECEIP	Т	You can also donate online at tourdecure.ca
 First Name					Each cheque must come with its own donation form.
First Name Last Name Company name (for Corporate donations only)					All donations will be credited in Canadian dollars.
Mailing Address					 All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-
City	Provin	ce	Postal Code		transferable.
Phone Number (manda	atory for credit card payments)				 Ask your company if they provide matching gifts for donations.
breakthroughs, lat	o receive emails from the BC test news and events, and fun	draising initiatives.		1	please visit: bccancerfoundation.com
□ \$2,500 □ \$1,500 □ \$1,000 □ \$500 □ \$250	Ambassador Ambassador Challenger Champion Catalyst Supporter	Payments Over (monthly paymen cannot extend be	Fime . monthly paym ts must be \$25	or higher and	
□\$	Custom ame or message as you would	N like it to annear on	the participan	it's Hanour Re	
☐ I prefer not to show	w the amount of my gift on the name to appear on the Tour de	e participant's Honou			
SELECT BETWEEN	I TWO EASY PAYMENT OPT	IONS			
☐ Personal Cheque	Single payment in full only. P number on all cheques.	lease make cheques	oayable to Tour	de Cure. Incli	ude participant name and
☐ Credit card	Single or monthly payments. Your statement(s) will read Tour de Cure BC Cancer. Payments commence immediately upon the processing of this form by the donation office.				
Card Number			CVV		Exp Visa Mastercard Amex
Cardholder Name _		Cardholder Sign	ature		