



2024 DONATION FORM

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

WHO ARE YOU DO		1297			Please mail this form or dro off with your donation to t address:		
Susan Rutled	Participant number				BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1	150-686 W. Broadway	
PLEASE PRINT CL	EARLY, AS YOU WISH IT	TO APPEAR ON	YOUR TAX RE	CEIPT	You can also donate online tourdecure.ca	e at	
First Name		t Name			• Each cheque must com with its own donation f		
		L Name			All donations will be credited in Canadian		
Company name (for Co	orporate donations only)				dollars.		
Mailing Address					All donations are 100% deductible, tax receipta (if you donate \$10 or m non-refundable and no	ible iore),	
City	Pro	vince	Postal Co	ode	transferable.		
Phone Number (manda	atory for credit card payments)				 Ask your company if the provide matching gifts donations. 		
breakthroughs, lat	o receive emails from the B test news and events, and f			earch	For more information abo BC Cancer Foundation, please visit: bccancerfoundation.com		
_	nything you can give. Every	-					
□ \$2,500	Ambassador	Payments		nayments of ¢			
□ \$1,500	Challenger	(monthly na		payments of \$ e \$25 or higher a	and		
□ \$1,000	Champion		end beyond Aug		aria		
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□ \$250 □ \$	Supporter Custom						
	ime or message as you wo	uld like it to appe	ear on the parti	cipant's Honou	ır Roll		
☐ I do not want my n	w the amount of my gift on to appear on the Tour of TWO EASY PAYMENT O	de Cure website.	lonour Roll.				
SELECT DET WEEN	TWO EAST PATMENT OF	HON5					
☐ Personal Cheque	Single payment in full only number on all cheques.	. Please make che	eques payable to	Tour de Cure. I	Include participant name and		
☐ Credit card	Single or monthly paymen immediately upon the prod				ancer. Payments commence		
Card Number				CVV	Exp	card	
Cardholder Name		Cardholde	er Signature				