



2025 DONATION FORM

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

	esse Smith 1393					Please mail this form or drop off with your donation to this address:
Jesse Smith		Participant number				BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO	APPEAR ON Y	OUR TAX RE	CEIPT		You can also donate online at tourdecure.ca
E M						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
Mailing Address						dollars.All donations are 100% tax deductible, tax receiptable
City	Provir	nce	Postal Co	de		(if you donate \$10 or more), non-refundable and non- transferable.
Phone Number (mandatory for credit card payments)						 Ask your company if they provide matching gifts for donations.
	ceipt by email) o receive emails from the BC est news and events, and fur			earch		For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
	EVEL OF DONATION					
\$2,500	Ambassador Challenger Champion Catalyst Supporter Custom	Payments O (monthly pay	ver Time			
Please enter your na	me or message as you would	d like it to appea	r on the parti	cipant's Hon	our Roll	
•	w the amount of my gift on the ame to appear on the Tour de		nour Roll.			-
SELECT BETWEEN	TWO EASY PAYMENT OPT	TIONS				
☐ Personal Cheque	Single payment in full only. F	Please make cheq	ues payable to	Tour de Cure	e. Include p	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	Signature _			