



## 2024 DONATION FORM

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

WHO ARE YOU DO		Please mail this form or drop off with your donation to this address:
Darla Steers Name	1420 Participant number	BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO APPEAR ON YOUR TAX RECEIPT	You can also donate online at tourdecure.ca
First Name	Last Name	• Each cheque must come with its own donation form.
	prporate donations only)	All donations will be credited in Canadian dollars.
Mailing Address City	Province Postal Code	<ul> <li>All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-transferable.</li> </ul>
Phone Number (manda	tory for credit card payments)	<ul> <li>Ask your company if they provide matching gifts for donations.</li> </ul>
breakthroughs, lat	ereceive emails from the BC Cancer Foundation about research est news and events, and fundraising initiatives.	For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
We're grateful for an  ☐ \$2,500  ☐ \$1,500  ☐ \$1,000  ☐ \$500  ☐ \$250  ☐ \$	Ambassador Challenger Champion Catalyst Supporter Custom  Cannot extend beyond August 31, 202	gher and
Please enter your na	me or message as you would like it to appear on the participant's H	onour Roll
□ I do not want my n	v the amount of my gift on the participant's Honour Roll. ame to appear on the Tour de Cure website.  TWO EASY PAYMENT OPTIONS  Single payment in full only. Please make cheques payable to Tour de Conumber on all cheques.	Cure. Include participant name and
☐ Credit card	Single or monthly payments. Your statement(s) will read Tour de Cure immediately upon the processing of this form by the donation office.	BC Cancer. Payments commence
Card Number	cvv	Exp Visa Mastercard
Cardholder Name	Cardholder Signature	