



2025 DONATION FORM

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

	HO ARE YOU DONATING TO? Martin Telford 1466				Please mail this form or drop off with your donation to this address: BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
Martin Telfor	a	Participant number			
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO	O APPEAR ON YOUR	TAX RECEIPT		You can also donate online at tourdecure.ca
E . M					Each cheque must come with its own donation form.
Eirst Name Last Name Company name (for Corporate donations only)					 All donations will be credited in Canadian
	прогате иопатон в отту				dollars.All donations are 100% tax
Mailing Address					deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-
City	Provi	nce	Postal Code		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 test news and events, and fu		bout research		For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
CHOOSE YOUR LE	EVEL OF DONATION				
We're grateful for an	nything you can give. Every o	dollar helps save more	lives!		
□ \$2,500	Ambassador	Payments Over T			
□ \$1,500	Challenger		monthly payments of		
□ \$1,000	Champion		s must be \$25 or hig ond August 31, 2025		
□ \$500	Catalyst	carriot exteria bey	011a 7 agast 51, 2025	5.)	
□ \$250 □ \$	Supporter Custom				
	ame or message as you wou	ld like it to appear on	he participant's Ho	onour Roll	
-	w the amount of my gift on th name to appear on the Tour do		Roll.		_
SELECT BETWEEN	I TWO EASY PAYMENT OP	TIONS			
☐ Personal Cheque	Single payment in full only. number on all cheques.	Please make cheques p	ayable to Tour de C	ure. Include բ	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	Ехр	☐ Visa☐ Mastercard☐ Amex
Cardholder Name _		Cardholder Signa	ture		