



## 2024 DONATION FORM

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

WHO ARE YOU DO	ONATING TO?							form or drop onation to this	
Domon Willia		1579					dress:	oriation to this	
Damon Willia	ams	Participant number				15	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			u can also d urdecure.ca	onate online at	
First Name	Last N	ame				_ •		ie must come n donation form.	
						•	All donation credited in		
Company name (for Co	orporate donations only)						dollars.		
Mailing Address						•	deductible, (if you dona	ns are 100% tax tax receiptable ate \$10 or more), able and non-	
City	Provin	ce	Postal Co	ode			transferable	•	
Phone Number (mandatory for credit card payments)							<ul> <li>Ask your company if they provide matching gifts for donations.</li> </ul>		
,	ceipt by email)  o receive emails from the BC ( est news and events, and fun			earch		BC ple	r more infor Cancer Fou ease visit: cancerfound		
_	EVEL OF DONATION	J							
	ything you can give. Every do	ollar holps savo	moro livosl						
_		-							
☐ \$2,500	Ambassador	Payments O	wer Time monthly	navment	s of \$				
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□ \$250 □ \$	Supporter Custom								
	me or message as you would	d like it to appea	er on the parti	cipant's l	Honour R	toll			
	w the amount of my gift on the name to appear on the Tour de	-	pnour Roll.						
SELECT BETWEEN	TWO EASY PAYMENT OPT	IONS							
☐ Personal Cheque	Single payment in full only. P number on all cheques.	lease make chec	jues payable to	o Tour de	Cure. Incl	lude parti	cipant 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	· Signature .					-	