



## 2024 DONATION FORM

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

	HO ARE YOU DONATING TO?				off with you	Please mail this form or drop off with your donation to this address:	
Edwin Chan		Participant number			150-686 W	Foundation . Broadway . BC V5Z 1G1	
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO	APPEAR ON Y	OUR TAX RE	CEIPT		o donate online at	
					• Each ch	eque must come own donation form.	
First Name	Last N	lame			• All dona	tions will be	
Company name (for Co	orporate donations only)				credited dollars.	I in Canadian	
Mailing Address					deductil (if you d	tions are 100% tax ole, tax receiptable onate \$10 or more),	
City	Provin	nce	Postal Co	de	transfer	undable and non- able.	
Phone Number (manda	atory for credit card payments)					r company if they matching gifts for ns.	
	ceipt by email) o receive emails from the BC test news and events, and fun			earch	BC Cancer please visit	nformation about Foundation, : oundation.com	
CHOOSE YOUR LE	EVEL OF DONATION						
We're grateful for an	nything you can give. Every de	ollar helps save	more lives!				
□ \$2,500	Ambassador	Payments O	ver Time				
□ <b>\$1,500</b>	Challenger	, <del></del>		payments of \$	<del></del>		
□ <b>\$1,000</b>	Champion		ments must be d beyond Augi	2 \$25 or higher	and		
□ \$ <b>500</b>	Catalyst	Carmot exteri	a beyona Augi	15( 31, 2023.)			
□ \$250	Supporter						
□\$	Custom						
Please enter your na	ame or message as you would	d like it to appea	r on the parti	cipant's Hono	ır Roll		
-	w the amount of my gift on the name to appear on the Tour de		nour Roll.				
SELECT BETWEEN	I TWO EASY PAYMENT OPT	TIONS					
☐ Personal Cheque	Single payment in full only. P number on all cheques.	Please make cheq	ues payable to	Tour de Cure.	Include participant na	me 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 _			_ / unex	