



2024 DONATION FORM

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

WHO ARE YOU DONAT	ING TO?	1001				Please mail this form or drop off with your donation to this address:
Andrew Barbaza		Participant number				BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CLEARLY	, AS YOU WISH IT TO	APPEAR ON	YOUR TAX R	ECEIPT		You can also donate online at tourdecure.ca
						Each cheque must come with its own donation form.
First Name	Last No	ame				All donations will be credited in Canadian
Company name (for Corporat	e donations only)					dollars. • All donations are 100% tax
Mailing Address						deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-
City	Provinc	се	Postal C	ode		transferable.
Phone Number (mandatory fo	r credit card payments)					 Ask your company if they provide matching gifts for donations.
Email (to receive tax receipt by Yes, I would like to recei breakthroughs, latest ne	ve emails from the BC (search		For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
CHOOSE YOUR LEVEL (
We're grateful for anything ☐ \$2,500	g you can give. Every do Ambassador		e more lives! Over Time			
□ \$1,500	Challenger		monthly	/ payment		
□ \$1,000	Champion		ayments must b		-	
□ \$500	Catalyst	cannot ext	end beyond Au	gust 31, 20	23.)	
□ \$250	Supporter					
□\$	Custom					
Please enter your name or	message as you would	l like it to app	ear on the part	icipant's l	Honour R	oll
☐ I prefer not to show the a☐ I do not want my name to	o appear on the Tour de	Cure website.	Honour Roll.			
SELECT BETWEEN TWO	EASY PAYMENT OPT	IONS				
	e payment in full only. Pl per on all cheques.	lease make ch	eques payable t	o Tour de	Cure. Incl	lude participant name and
	e or monthly payments. ediately upon the proces					cer. Payments commence
Card Number				CVV		Exp Visa Mastercard
Cardholder Name		Cardhold	er Signature			