



2025 DONATION FORM

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

WHO ARE YOU DONATIN	G TO?					Please mail this form or drop off with your donation to this
Russell Koenigbau	ır	1899				address:
Name		Participa	nt number			BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CLEARLY, A	AS YOU WISH IT TO	APPEAR ON	YOUR TAX RE	CEIPT		You can also donate online at tourdecure.ca
First Name	Last Na	ame				• Each cheque must come with its own donation form.
		arric				All donations will be credited in Canadian
Company name (for Corporate o	lonations only)					dollars.
Mailing Address						 All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-
City	Provinc	ce	Postal Co	ode		transferable.
Phone Number (mandatory for c	redit card payments)					 Ask your company if they provide matching gifts for donations.
Email (to receive tax receipt by e	mail)					For more information about BC Cancer Foundation, please visit:
☐ Yes, I would like to receive breakthroughs, latest news				earch		bccancerfoundation.com
CHOOSE YOUR LEVEL OF	DONATION					
We're grateful for anything y	ou can give. Every do	ollar helps sav	e more lives!			
□ \$2,500	Ambassador		Over Time			
□ \$1,500 □ \$1,500	Challenger			payments of \$	S	
□ \$1,000 □ \$1,000	Champion		ayments must b	e \$25 or highe		
□ \$500	Catalyst	cannot ext	end beyond Aug	ust 31, 2025.)		
□ \$250	Supporter					
□ \$	Custom					
Please enter your name or m	essage as you would	d like it to app	ear on the part	cipant's Hono	our Roll	
☐ I prefer not to show the am	ount of my gift on the	e participant's l	Honour Roll.			-
□ I do not want my name to a						
SELECT BETWEEN TWO E	ASY PAYMENT OPT	IONS				
	payment in full only. Pl r on all cheques.	lease make ch	eques payable t	Tour de Cure	e. Include p	articipant name and
	or monthly payments. ately upon the proces				Cancer. Pa	
Card Number				CVV	Ехр	☐ Visa ☐ Mastercard
		Cauala - I -	or Cianatura			☐ Amex
Cardholder Name			er Signature .			