



2024 DONATION FORM

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

WHO ARE YOU DO		2450	Please mail this form or drop off with your donation to this address:
Ellen Kief Name		Participant number	BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO AP	PEAR ON YOUR TAX RECEIPT	You can also donate online at tourdecure.ca
First Name	Last Name		• Each cheque must come with its own donation form.
	orporate donations only)		 All donations will be credited in Canadian dollars.
Mailing Address City	Province	Postal Code	 All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-transferable.
Phone Number (mandatory for credit card payments)			 Ask your company if they provide matching gifts for donations.
breakthroughs, late	o receive emails from the BC Can est news and events, and fundrai	sing initiatives.	For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
We're grateful for ar □ \$2,500 □ \$1,500 □ \$1,000 □ \$500 □ \$250 □ \$ \$	Challenger Champion	Payments Over Time monthly payments of \$ (monthly payments must be \$25 or higher and cannot extend beyond August 31, 2023.)	1
Please enter your na	me or message as you would lik	e it to appear on the participant's Honour F	Roll
□ I do not want my r	w the amount of my gift on the parame to appear on the Tour de Cur TWO EASY PAYMENT OPTION Single payment in full only. Pleas number on all cheques.	e website.	lude participant name and
☐ Credit card		r statement(s) will read Tour de Cure BC Can g of this form by the donation office.	•
Card Number		CVV	Exp Visa Mastercard Amex
Cardholder Name		Cardholder Signature	