



2025 DONATION FORM

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

WHO ARE YOU DOI		24.00	Please mail this form or drop off with your donation to this address:
Jenn Schofield	<u> </u>	Participant number	BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CLEA	ARLY, AS YOU WISH IT TO	APPEAR ON YOUR TAX RECEIPT	You can also donate online at tourdecure.ca
First Name	Last Na	me	Each cheque must come with its own donation form.
Company name (for Corp			 All donations will be credited in Canadian dollars.
Mailing Address	Provinc	re 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.
	receive emails from the BC Cost news and events, and fund	Cancer Foundation about research draising initiatives.	For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
	thing you can give. Every do		
□ \$2,500 □ \$1,500 □ \$1,000 □ \$500 □ \$250	Ambassador Challenger Champion Catalyst Supporter Custom	Payments Over Time monthly payments of \$ (monthly payments must be \$25 or higher and cannot extend beyond August 31, 2025.)	
Please enter your nam	e or message as you would	like it to appear on the participant's Honour Roll	
☐ I do not want my nar SELECT BETWEEN T ☐ Personal Cheque	number on all cheques.	ONS ease make cheques payable to Tour de Cure. Include	
		our statement(s) will read Tour de Cure BC Cancer. P sing of this form by the donation office.	
Card Number		CVV	☐ Visa☐ Mastercard☐ Amex
Cardholder Name		Cardholder Signature	