



2025 DONATION FORM

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

WHO ARE YOU DO	~		Please mail this form or drop off with your donation to this address:
Maxine Rowe	Participant	number	BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CLE	ARLY, AS YOU WISH IT TO APPEAR ON \	OUR TAX RECEIPT	You can also donate online at tourdecure.ca
First Name	Last Name		Each cheque must come with its own donation form.
Company name (for Co			 All donations will be credited in Canadian dollars.
Mailing Address	Province	Postal Code	 All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non- transferable.
Phone Number (manda	ory for credit card payments)		 Ask your company if they provide matching gifts for donations.
breakthroughs, late	receive emails from the BC Cancer Founda est news and events, and fundraising initiation	es.	BC Cancer Foundation, please visit: bccancerfoundation.com
 \$2,500 \$1,500 \$1,000 \$500 \$250 \$ 			_
Please enter your na	ne or message as you would like it to appe	ar on the participant's Honour Ro	.l
-	the amount of my gift on the participant's Home to appear on the Tour de Cure website.	onour Roll.	
SELECT BETWEEN	TWO EASY PAYMENT OPTIONS		
☐ Personal Cheque	Single payment in full only. Please make chec number on all cheques.	ques payable to Tour de Cure. Includ	le participant name and
☐ Credit card	Single or monthly payments. Your statement immediately upon the processing of this form		
Card Number		CVV	□ Visa □ Mastercard
Cardholder Name	Cardholde	r Signaturo	□ Amex