



## 2024 DONATION FORM

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

WHO ARE YOU DO	DNATING TO?			Please mail this form or drop off with your donation to this
Byron Chan	Byron Chan 244			address:
Byron Chan Name		Participant number		BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CLE	ARLY, AS YOU WISH IT TO	APPEAR ON YOUR TAX	RECEIPT	You can also donate online at tourdecure.ca
First Name	Last N	ame		• Each cheque must come with its own donation form.
Company name (for Corporate donations only)				<ul> <li>All donations will be credited in Canadian dollars.</li> </ul>
				All donations are 100% tax
Mailing Address				deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-
City	Provin	ce Postal	Code	transferable.
Phone Number (mandatory for credit card payments)				<ul> <li>Ask your company if they provide matching gifts for donations.</li> </ul>
Email (to receive tax receipt by email)				For more information about BC Cancer Foundation, please visit:
	receive emails from the BC ( est news and events, and fun		research	bccancerfoundation.com
CHOOSE YOUR LE	VEL OF DONATION			
We're grateful for any	ything you can give. Every do	ollar helps save more lives	!	
□ \$2,500	Ambassador	Payments Over Time		
□ \$1,500	Challenger	mont	hly payments of \$	_
□ <b>\$1,000</b>	Champion	(monthly payments mus		
□ \$500	Catalyst	cannot extend beyond A	August 31, 2023.)	
□ <b>\$250</b>	Supporter			
□\$	Custom			
Please enter your name	me or message as you would	like it to appear on the p	articipant's Honour Ro	и
☐ I prefer not to show	the amount of my gift on the	narticinant's Honour Roll		<del></del>
	ame to appear on the Tour de			
SELECT BETWEEN	TWO EASY PAYMENT OPT	IONS		
☐ Personal Cheque	Single payment in full only. Proumber on all cheques.	ease make cheques payabl	e to Tour de Cure. Inclu	de participant name and
☐ Credit card	Single or monthly payments. immediately upon the proces			
Card Number			CVV	Exp
Cardholder Name		Cardholder Signature		