



2024 DONATION FORM

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

WHO ARE YOU DO		2456			Please mail this form or drop off with your donation to this address:		
Jose Boteze	III	Participant numb	er		BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1		
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO	APPEAR ON YOUR	TAX RECEIPT		You can also donate online at tourdecure.ca		
Fig. 1.N.					Each cheque must come with its own donation form.		
First Name Last Name Company name (for Corporate donations only)					 All donations will be credited in Canadian dollars. 		
Mailing Address					All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non-		
City	Provin	ce	Postal Code		transferable.		
Phone Number (manda	atory for credit card payments)				 Ask your company if they provide matching gifts for donations. 		
breakthroughs, lat	o receive emails from the BC of the street news and events, and fun EVEL OF DONATION anything you can give. Every do	draising initiatives.			please visit: bccancerfoundation.com		
 \$2,500 \$1,500 \$1,000 \$500 \$250 \$ 	Ambassador Challenger Champion Catalyst Supporter Custom	Payments Over T	ime monthly payme s must be \$25 o	r higher and	_		
Please enter your na	ame or message as you would	d like it to appear on	the participant'	s Honour Roll	L		
•	w the amount of my gift on the name to appear on the Tour de		Roll.				
SELECT BETWEEN	I TWO EASY PAYMENT OPT	IONS					
☐ Personal Cheque	Single payment in full only. P number on all cheques.	lease make cheques p	ayable to Tour o	le Cure. Includ	e participant name and		
☐ Credit card	Single or monthly payments. Your statement(s) will read Tour de Cure BC Cancer. Payments commence immediately upon the processing of this form by the donation office.						
Card Number			CVV	E	□ Visa □ Mastercard □ Amex		
Cardholder Name _		Cardholder Signa	ture				