



2025 DONATION FORM

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

| WHO ARE YOU DO | | 2 | 50 | | | | (| | your dor | orm or drop nation to this | |
|-----------------------|---|---------------|--------------------|-------------|----------|------------|----------|--|--------------------------|--|----------|
| Brent Davids | Participant number | | | | | | : | BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1 | | | |
| PLEASE PRINT CL | EARLY, AS YOU WISH | I IT TO API | PEAR ON YOU | R TAX RE | CEIPT | | , | | n also dor | nate online a | t |
| | | | | | | | | | | must come donation for | m |
| First Name Last Name | | | | | | | | All donations will be credited in Canadian | | | |
| Company name (for Co | orporate donations only) | | | | | | | dolla | | 4000/ | |
| Mailing Address | | | | | | | | ded (if yo | uctible, ta ou donate | are 100% ta: x receiptable \$10 or mor ble and non- | e e), |
| City | | Province | | Postal Co | de | | | | sferable. | ne and non- | |
| Phone Number (manda | atory for credit card paym | ents) | | | | | | prov | | pany if they hing gifts fo | |
| | ceipt by email) o receive emails from thest news and events, a | | | about res | earch | | 1 | BC Can olease | cer Foun visit: | ation about dation, tion.com | |
| CHOOSE YOUR LE | EVEL OF DONATION | | | | | | | | | | |
| We're grateful for an | nything you can give. E | very dollar | helps save mo | re lives! | | | | | | | |
| □ \$2,500 | Ambassa | ador F | Payments Over | Time | | | | | | | |
| □ \$1,500 | Challeng | ger , | monthly paymer | _ monthly | | | | | | | |
| □ \$1,000 | Champio | OH | cannot extend be | | | | ı | | | | |
| □ \$500 | Catalyst | | | , , | | | | | | | |
| □ \$250 □ \$ | Supporte Custom | | | | | | | | | | |
| Please enter your na | ime or message as you | ı would like | e it to appear or | n the parti | cipant's | Honour R | Roll | | | | |
| - | w the amount of my gift name to appear on the T | - | - | ır Roll. | | | | | | | |
| SELECT BETWEEN | I TWO EASY PAYMEN | T OPTION | S | | | | | | | | |
| ☐ Personal Cheque | Single payment in full number on all cheque | | e make cheques | payable to | Tour de | Cure. Incl | lude pa | rticipar | it name ar | ıd | |
| ☐ Credit card | Single or monthly pay immediately upon the | | | | | | cer. Pay | ments (| commenc | | |
| Card Number | | | | | CVV | | Ехр | | | ☐ Visa☐ Masterca☐ Amex | ď |
| Cardholder Name _ | | | Cardholder Sigi | nature _ | | | | | | | |