



2025 DONATION FORM

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

WHO ARE YOU DONATING TO?				Please mail this form or drop off with your donation to this address:
Aaron Deme	<u>S</u>	Participant number	BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1	
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO A	APPEAR ON YOUR TAX RECEIP	Г	You can also donate online at tourdecure.ca
First Name	Last Nar	me		• Each cheque must come with its own donation form.
	prporate donations only)			 All donations will be credited in Canadian dollars.
Mailing Address City	Province	e 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.
breakthroughs, late	est news and events, and fund			BC Cancer Foundation, please visit: bccancerfoundation.com
\$2,500 \$1,500 \$500 \$500 \$250 \$	Ambassador Ambassador Challenger Champion Catalyst Supporter Custom	Payments Over Time monthly payments must be \$25 cannot extend beyond August 31,	or higher and	
Please enter your na	me or message as you would	like it to appear on the participan	t's Honour Roll	
☐ I do not want my n	w the amount of my gift on the part of the part of the Tour de C	ONS	de Comp. I. d. i.	
☐ Personal Cheque	Single payment in full only. Please make cheques payable to Tour de Cure. Include participant name and number on all cheques. Single or monthly payments. Your statement(s) will read Tour de Cure BC Cancer. Payments commence			
☐ Credit card	immediately upon the processing of this form by the donation office.			ayments commence ☐ Visa
Card Number		CVV	Ехр	
Cardholder Name		Cardholder Signature		