



2024 DONATION FORM

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

WHO ARE YOU DON		270	Please mail this form or drop off with your donation to this address:
David Desroch	iers	Participant number	BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1
PLEASE PRINT CLEA	RLY, AS YOU WISH IT TO A	APPEAR ON YOUR TAX RECEIPT	You can also donate online at tourdecure.ca
First Name	Last Nar	me	• Each cheque must come with its own donation form.
Company name (for Corporate 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, latest	eceive emails from the BC C t news and events, and fund EL OF DONATION		For more information about BC Cancer Foundation, please visit: bccancerfoundation.com
We're grateful for anyth ☐ \$2,500 ☐ \$1,500 ☐ \$1,000 ☐ \$500 ☐ \$250 ☐ \$	hing you can give. Every dol Ambassador Challenger Champion Catalyst Supporter Custom	Payments Over Time monthly payments of \$ (monthly payments must be \$25 or higher and cannot extend beyond August 31, 2023.)	
Please enter your name	e or message as you would l	like it to appear on the participant's Honour Roll	
□ I do not want my nam SELECT BETWEEN T		ure website.	participant name and
☐ Credit card Si		our statement(s) will read Tour de Cure BC Cancer. Fing of this form by the donation office.	Payments commence
Card Number	initediatety upon the process	CVV Ex	☐ Visa☐ Mastercard☐ Amex
Cardholder Name		Cardholder Signature	