



2024 DONATION FORM

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

WHO ARE YOU DO		486		Please mail this form or drop off with your donation to this address:
Ladybits Name		Participant number	BC Cancer Foundation icipant number 150-686 W. Broadwa Vancouver, BC V5Z 1	
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO AF	PPEAR ON YOUR TAX RE	CEIPT	You can also donate online at tourdecure.ca
F. IN				Each cheque must come with its own donation form.
First Name Company name (for Co	Last Name	e		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	Province	Postal Co	de	transferable.
Phone Number (manda	tory for credit card payments)			 Ask your company if they provide matching gifts for donations.
breakthroughs, lat	o receive emails from the BC Car est news and events, and fundra EVEL OF DONATION ything you can give. Every dolla	aising initiatives.	earch	please visit: bccancerfoundation.com
<pre>\$2,500</pre> \$1,500 \$1,000 \$500 \$250 \$	Challenger Champion	Payments Over Time monthly (monthly payments must be cannot extend beyond Aug		-
Please enter your na	me or message as you would lik	e it to appear on the parti	cipant's Honour Roll	
•	v the amount of my gift on the pa ame to appear on the Tour de Cui	·		
SELECT BETWEEN	TWO EASY PAYMENT OPTIO	NS		
☐ Personal Cheque	Single payment in full only. Pleas number on all cheques.	se make cheques payable to	o Tour de Cure. Include	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 Ex	rp ☐ Visa ☐ Mastercard ☐ Amex
Cardholder Name _		_ Cardholder Signature _		