



## 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?  Chris Hill 647							Please mail this form or drop off with your donation to this address:	
Chris Hill Name		Participant number					BC Cancer Foundation 150-686 W. Broadway Vancouver, BC V5Z 1G1	
PLEASE PRINT CL	EARLY, AS YOU WISH IT TO	APPEAR ON	YOUR TAX RE	CEIPT			You can also donate online at tourdecure.ca	
First Name	Last N	lame					• Each cheque must come with its own donation form.	
Company name (for Corporate donations only)							<ul> <li>All donations will be credited in Canadian dollars.</li> </ul>	
Mailing Address  City	Provir	nce	Postal Co	ode			<ul> <li>All donations are 100% tax deductible, tax receiptable (if you donate \$10 or more), non-refundable and non- transferable.</li> </ul>	
Phone Number (mandatory for credit card payments)							<ul> <li>Ask your company if they provide matching gifts for donations.</li> </ul>	
breakthroughs, late	o receive emails from the BC test news and events, and fur EVEL OF DONATION	ndraising initiati	ves.	search			BC Cancer Foundation, please visit: bccancerfoundation.com	
\$2,500   \$1,500   \$500   \$500   \$250   \$	Ambassador Ambassador Challenger Champion Catalyst Supporter Custom	Payments (		e \$25 or	higher and	t t		
Please enter your na	me or message as you would	d like it to appe	ar on the part	icipant's	Honour F	Roll		
☐ I do not want my n	w the amount of my gift on the lame to appear on the Tour de	Cure website.	l				-	
☐ Personal Cheque	number on all cheques.							
☐ 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		Ехр	☐ Mastercard	
Cardholder Name		Cardholde	er Signature					