



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? Julie Hunter 686				Please mail this form or drop off with your donation to this address:	
Julie Hunter 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 Y	OUR TAX REC	CEIPT	You can also donate online at tourdecure.ca
Fig. 1.N.					• Each cheque must come with its own donation form.
First Name Last Name Company name (for Corporate donations only)					 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	Provir	nce	Postal Cod	le	transferable.
Phone Number (mandatory for credit card payments)					 Ask your company if they provide matching gifts for donations.
breakthroughs, lat	o receive emails from the BC test news and events, and fur EVEL OF DONATION	ndraising initiative	es.	arch	please visit: bccancerfoundation.com
_	ything you can give. Every d	-			
<pre>□ \$2,500</pre> □ \$1,500 □ \$1,000 □ \$500 □ \$250 □ \$	Ambassador Challenger Champion Catalyst Supporter Custom		monthly	payments of \$ _ \$25 or higher and sst 31, 2025.)	1
Please enter your na	me or message as you would	d like it to appear	r on the partic	ipant's Honour F	Roll
•	w the amount of my gift on the		nour Roll.		
SELECT BETWEEN	TWO EASY PAYMENT OPT	TIONS			
☐ Personal Cheque	Single payment in full only. F number on all cheques.	Please make chequ	ues payable to	Tour de Cure. Inc	lude 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	Exp
Cardholder Name _		Cardholder	Signature _		