



2024 DONATION FORM

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

	HO ARE YOU DONATING TO?				Please mail this form or drop off with your donation to this address:
Jesse Kirkby 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 YO	UR TAX REC	EIPT	You can also donate online at tourdecure.ca
 First Name					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	Provin	ice	Postal Cod	e	transferable.
Phone Number (manda	atory 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 fun	idraising initiatives		arch	please visit: bccancerfoundation.com
_	ything you can give. Every do	•			
<pre>□ \$2,500 □ \$1,500 □ \$1,000 □ \$500 □ \$250</pre>	Ambassador Challenger Champion Catalyst Supporter Custom	(monthly paym cannot extend	monthly pents must be	ayments of \$ \$25 or higher and st 31, 2023.)	
Please enter your na	me or message as you would	d like it to appear	on the partic	ipant's Honour R	toll
•	w the amount of my gift on the name to appear on the Tour de		our Roll.		
SELECT BETWEEN	TWO EASY PAYMENT OPT	IONS			
☐ Personal Cheque	Single payment in full only. P number on all cheques.	lease make cheque	es 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 Si	ignature		