



2024 DONATION FORM

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

	o are you donating to? rian Kunimoto 817					Please mail this form or drop off with your donation to this address:	
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 F	RECEIPT		You can also donate online at tourdecure.ca	
F. IN						Each cheque must come with its own donation form.	
First Name		Last Name				All donations will be	
Company name (for Co	prporate donations only)					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	Code		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 rest news and events, a EVEL OF DONATION			esearch		BC Cancer Foundation, please visit: bccancerfoundation.com	
We're grateful for an	ything you can give. E	very dollar helps	s save more lives!				
□ \$2,500 □ \$1,500 □ \$1,000 □ \$500 □ \$250	Ambassa Challeng Champio Catalyst Supporte Custom	ger (month on cannot	ents Over Time month nly payments must t extend beyond Ar		her and		
Please enter your na	me or message as you	would like it to	appear on the pa	rticipant's Ho	onour Roll		
☐ I do not want my n	w the amount of my gift ame to appear on the To TWO EASY PAYMEN	our de Cure webs				_	
☐ Personal Cheque	Single payment in full number on all cheque	-	e cheques payable	to Tour de C	ure. Include p	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		Card	holder Signature			☐ Amex	