



## DONATION FORM

Please print and complete this form then mail or fax to:

Mail: L'Arche Canada Foundation | 300-10271 Yonge St. | Richmond Hill, ON L4C 3B5  
Fax: 905.884.4819 (Attn: Donations)  
Telephone: 1.800.571.0212 ext. 104 or 905.770.7696 ext. 104

### DONATION TYPE

- General donation (one-time gift)       Monthly Donation
- In Memory of: \_\_\_\_\_
- In Honour of: \_\_\_\_\_
- In support of a specific L'Arche Community; \_\_\_\_\_
- The L'Arche Canada Foundation can share my name with this community.*

### DONOR INFORMATION

Organization Name (if applicable): \_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### DONATION DETAILS

- One-Time Gift**       \$100       \$75       \$50       \$25      Other: \_\_\_\_\_
- Monthly Donation**       \$ 50       \$25       \$15       \$10      Other: \_\_\_\_\_
- Cheque (please make payable to: L'Arche Canada Foundation)
- Visa       MasterCard       American Express
- Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

An official tax receipt and acknowledgement will be issued for all donations of \$20 or more.

**MONTHLY DONATIONS ONLY** – Deductions will be made on the 15<sup>th</sup> of each month.

- OPTION 1  Please withdraw the amount above from my bank account. I have enclosed a VOID cheque.  
OPTION 2  Please charge my credit card for the amount indicated above. My credit card number is above.

### ACKNOWLEDGEMENT CARD

- If your donation is in memory or in honour, please send the acknowledgement card to:  
 No card required.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Personal Message: \_\_\_\_\_

- Yes, L'Arche Canada can provide my name and address to the recipient of this card.

**THANK YOU FOR YOUR SUPPORT!**  
Charitable Registration Number: 88990 9719 RR001