



Society of Sharing: Inner-City Volunteers

Charitable Business Number: 10799 0699 RR0001

Donation Form

Yes, I want to support the Society of Sharing: Inner-City Volunteers

Mr. Mrs. Ms. Miss. Other _____

First Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Donation in honour / memory of : _____

I would like to give a one time donation of : \$ _____

I would like to join the 'Monthly Giving Group' and make a donation of \$ _____
each month on the _____ day.

Method of Payment :

Visa MasterCard Amex

Card holder's name _____ Signature _____

Card Number _____ Expiry Date _____

Money Order

Cheque (please make cheques payable to Society of Sharing)

I have remembered the Society of Sharing in my will.

Donations of \$ 10.00 or more will receive an official donation receipt for income tax purposes.

Society of Sharing: Inner-City Volunteers publicly acknowledges all donations. Should you wish to withhold your permission for this use, please check box provided Withhold my name

Society of Sharing: Inner-City Volunteers is committed to protecting your privacy. Society of Sharing collects, uses and discloses the personal information on this form in accordance with the Canadian Privacy Laws

Mail or fax our completed donation form to Society of Sharing: Inner-City Volunteers at :
10 St. Mary street, Suite 607, Toronto, Ontario M4Y 1P9 Tel : 416-413-0380 Fax: 416-413-4814