Individual Donation Form

Thank you for donating to the Northern Pass to Conquer Cancer™ benefitting The Princess Margaret.



CVV:

Cardholder Signature: _

Which event year are you donating t	0? 20		
Who are you donating to?		Please mail this form with your donation to:	
Name:	_ Participant Number (if known):	The Princess Margaret Cancer Foundation 610 University Ave. Toronto, ON M5G 2M9	
Team Name (if applicable):		Please note the following before you send	
Diago print vous nome clearly on vo	u wish it to appear on your tay receipt	in your donation:	
First Name:	u wish it to appear on your tax receipt. Last Name:	 Each cheque must come with its own donation form 	
Company Name (for business donations):		All donations will be credited in Canadian dollars	
Address:		We cannot accept cash donations	
City: Province:	Postal Code:	If you donate \$15 or more, you will receive a tax receipt	
Email (to receive tax receipt by email):		 All donations are non-refundable and non-transferable 	
Phone (mandatory for credit card payments): Please check this box if you consent to receiving communications from Northern Pass to Conquer Cancer, including event updates, fundraising tips, and information on how funds raised are being used. You may withdraw your consent by opting out at any time.		Credit card statements will say PM CANCER FOUNDATION Toronto ON More ways to donate:	
		Ask your company if they provide	
		matching gifts for donations	
Choose your level of donation: We're grateful for anything you can give. Every dollar help: Honourary Rider \$1,000	s save more lives. Many people leave a gift in their will to charities tha	Donate online at NorthernPass.ca at are important in their life	
Crusader	Please have someone contact me about leaving a gift to The Princess Margaret Cancer Foundation. Please enter your name as you would like it to appear on the participant's Honour Roll:		
Speedster \$500 Explorer \$250			
Roadie	I prefer not to show the amount of my gift on the participant's Honour Roll.		
Free Wheeler (any amount) \$	I do not want my name to appear on the Northern Pass to Conquer Cancer website.		
Select between two easy payment optic	ons:		
Personal Cheque Single payment in full or	ly. Please make cheques payable to: Northern Pass. Include particip	pant name and number on all cheques.	
Credit Card Single payment in full only. Pay	ment will be processed immediately upon the processing of this for	m by the donation office.	
Visa Mastero	card Amex		

Card Number: ______

Cardholder Name: