

Donation Form

YES! I would like to	make a gift to:	<u></u>				
				Please pro	ovide the name of fund	
One-Time Gift of	□ \$250	□ \$100	□ \$50	□Other \$		
Monthly Gift* of	□ \$50	□ \$30	□ \$20	□Other \$	*Charged on the 15 th of each month.	
PAYMENT INFORM	ATION	Select one	of the payme	nt options belov	ow:	
By Credit Card: Card #	□ Visa	□ MC	□ Amex	Expiry Date:	::CVV # (Security code):	
Cardholder Name					<u></u>	
By EFT/Wire/	Mal	ce payable to	: MakeWay Fo	oundation - 'In	nsert Fund Name'	
Cheque:	Not	e: If "MakeWa	v Foundation"	' is not in the pa	payee line, your cheque will be returned for re-issue	_
By Monthly Debit f Name of Financial In		count (Pleas	e attach a VO	OID cheque):		
					MakeWay. Your full name and mailing address are requi receive a tax receipt in February of the following year.	red
Signature of C	ard Holder/A	ccount Hold	er		Date	
DONOR INFORMAT	TION					
Name			Phone Numbe	er	Email (required for e-tax receipt)	
Street Address			City		Province Postal Code	
☐ I would like my gif	-	•	-		ırance, or other planned gift.	
		•		. •	o wish to receive these.	
		•		•	wish to receive these.	
☐ Please recognize		-				
☐ I am making a tribute gift (select one):			☐ In Honour ☐ In Memory			
Honouree/In Memori	am Name					
			Name and add	dress of the per	erson who should be notified of your tribute gift.	

MakeWay is committed to protecting your privacy. Names, addresses, or other personal information collected by MakeWay will only be used in accordance with Canadian privacy laws and MakeWay's Privacy Policy, and will not be disclosed to any third party. For more information, call our Privacy Officer at 1-866-843-3722.

THANK YOU!

Please send completed form by: MAIL | MakeWay, 400-163 West Hastings St, Vancouver, BC V6B 1H5
OR FAX | 1-866-780-6611 OR EMAIL | donations@makeway.org

MakeWay works with people like you to promote a healthy environment, social equity, and economic prosperity.

Learn more: makeway.org | Twitter: @MakeWay | Facebook: facebook.com/makeway