

Corporate Donation Form

Please fill in information and mail or fax it to our office. Please print in BLOCK letters. **Please sign form in the Payment Option section**.

Corporate Information (An official tax receipt will be mailed within 30 days upon receipt of donation.)											
• • • • • • • • • • • • • • • • • • • •						sentative's Name (First & Last):					
Street Address (#, street, suite/apt)											
City	Prov./State Postal/Zip Code					Country					
Office Number		Extensio	n			E-mail					
Corporate Gift (All figures are in Canadian currency) For an online currency converter, available at http://www.xe.net/ucc											
Single Donation - We would like to make a donation in the amount of: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \											
\$500 \$2,000 \$10,000 Monthly Plan - We will debit your credit card, deposit your cheque(s) or you may set up automatic monthly bank withdrawals. (You may cancel at anytime by calling the Fundraising Activity Centre at 416-490-8844 or e-mail fundraising@lifeguarding.com).											
I would like to make a monthly donation in the amount of: \$50 \$				\$200	\$250	O \$5	500	Other amou	ınt \$		
Beginning on (month, day, year)											
Payment Options											
We would like to pay by Credit Card	(Card Type)	VISA	Mas Mas	terCard	AM	EX					
Card Number			Expiration	n Date							
Cardholder Name				Cardholder Signature (please sign form)							
We would like to pay by Cheque or Money Order Please find enclosed a cheque or money order in the amount of: \$ Set-up Automatic Bank Withdrawal - Lifesaving Society account (418442 – 06840 – 306921) via your Personal Chequing Account											
We would like to designate a donation to	: (please check	only ONE)								
Water Smart® Public Education (e.g. Within Arms Reach, Safety Tips)	ū	Swim to (Water Sa	Survive fety Survival Skill Training Program)			n)	Olive Pretty Archives (e.g. preservation of Society's records, library)				
Brian Jones Memorial Fund (Boat Safety Education)	ū		Programs g, Lifeguard	ng, First Aid)			Swim for Life® Program (e.g. Parent & Tot, Preschool, Swimmer)				
Hilary M. Weston – BM Fund (Bronze Medallion training for disadvantaged yo	uth)	Lifesavir (Dev. of Lit	g Sport esaving Sport, Coaching, Officiating)			g) 🗖	Lifeguard/Lifesaving Championships (Support Pool & Waterfront competitions)				
Royce Crossley-Hickman Fund – NLS (National Lifeguard Service training for disadvan		Club Development (Support dev. of Junior Lifeguard Clubs)				ū	National Lifesaving Team (Athlete support at international competitions)				
Privacy: The Lifesaving Society respects your privacy. We do not rent, trade or sell our mailing lists, and we maintain the confidentiality of our donor information. Thank you for your support. You are our lifesavers! WEB 2011											
Please DO NOT LIST donation in the	e Annual Report										
Please DO NOT LIST donation on the Lifesaving Society website (<u>www.lifesavingsociety.com</u>)											
Please make cheque or money order payable to the LIFESAVING SOCIETY 400 Consumers Road, Toronto, ON M2J 1P8 Phone (416) 490-8844 Fax (416) 490-8766 E-mail fundraising@lifeguarding.com Charitable Registration No. (BN) 10809 7270 RR0001 Tax receipts will be issued for donations of \$20 or more Help us save lives!											