



JOURNEY TO CONQUER CANCER- RUN OR WALK DONATION FORM

Name Of Participant You're Supporting: _____

Print your name clearly, as you wish it to appear on your tax receipt.

First Name Last Name

Company Name

Suite/Apt. No. Mailing Address

City Province Postal Code

Phone (Mandatory for Credit Card Payments) Email Address (To receive tax receipt by email)

Donation Amount \$ _____

- Check this box if you prefer not to show the amount of your gift on the participant's Honour Roll.
 Check this box if you do not want your name to appear on the website's Honour Roll.

Payment Options

Personal Cheque – Please make cheques payable to: Princess Margaret Cancer Foundation

Credit Card: Visa MasterCard Amex

Number _____ Card

Expiry Date Signature

Please mail this form with your donation to:

c/o The Princess Margaret Cancer Foundation

610 University Avenue Toronto ON M5G 2M9

Fax: 416.946.6563

If you have any questions, please contact the Run or Walk Hotline at: 416.946.6584 or email runorwalk@thepmcf.ca

Please visit www.runorwalk.ca for all the information about this event

Tax receipts are issued for donations of \$15 or more.

Charitable Number 88900 7597 RR0001

Privacy Note: The Princess Margaret Cancer Foundation respects your privacy. We do not trade, rent or sell the names of our valued supporters.

Should you wish to be removed from our fundraising list(s), please contact us at 416.946.2114 or email us at list.removal@pmhf.ca