



## DONATION FORM

Please print and complete this form then mail to:  
The Salvation Army - 2 Overlea Blvd, Toronto, ON M4H 1P4

### DONATION TYPE

- General Donation (one-time gift)  
 Monthly Donation  
 In Memory of: \_\_\_\_\_  
 In Honour of: \_\_\_\_\_

### DONOR INFORMATION

Organization Name (if applicable): \_\_\_\_\_  
 Mr  Mrs  Ms  Miss  Dr  Other: \_\_\_\_\_  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 I allow The Salvation Army Canada to contact me by email

### DONATION DETAILS

\$100  \$75  \$50  \$25  Other: \$ \_\_\_\_\_  
 Cheque (please make payable to The Salvation Army)  
 Visa  Mastercard  American Express  
Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Name (as it appears on credit card): \_\_\_\_\_

*Your donation is tax-deductible. Tax Receipts will be issued for donations of \$10.00 or more, or upon request.*

### ACKNOWLEDGEMENT CARD

If donation is in memory or in honour, please send acknowledgment card to:  
 No card is required  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Personal Message: \_\_\_\_\_

#### Charitable Registration # 10795 1618 RR0001

The personal information you provide us is used to maintain contact with you. The Salvation Army does not sell, trade or share your information. If you wish to be removed from this mailing list, simply contact us by phone at **1-800-SAL-ARMY** or by visiting [SalvationArmy.ca/FAQ](http://SalvationArmy.ca/FAQ).