



Donor Information

Mr  Ms  Mrs  Mx

First Name Last Name
Street Address Apartment City Province
Postal Code Telephone Email

Donation

Amount: \$ \_\_\_\_\_

Type:  One-Time  Monthly  In Memoriam  In Honour
Your monthly donation will be automatically withdrawn from your bank account or credit card starting next month.

Payment:  Cheque Payable to REA Foundation.
 Pre-authorized withdrawal Please include a void cheque or complete the following information:



Transit No. Bank No. Account No.

Credit Card
 Visa  Mastercard
Card No. Expiry Date (MM/YY) CVV/CCV Code

Signature Date

If you are making an In Memoriam / In Honour Donation

In memory/honour of: \_\_\_\_\_
The Foundation will send an acknowledgment card to the family/honoured person. Please provide their contact information.

Mr  Ms  Mrs  Mx

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THANK YOU FOR YOUR KIND SUPPORT!

Please mail or email this form to the Foundation.