



## Grandview Kids Mail-In Gift Form

Please make all cheques payable to the Grandview Children's Foundation and complete the payment details below.

### CONTACT INFORMATION:

Date (mm/dd/yr): \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Enclosed is my gift of: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I would like my gift to Help Kids TODAY: \_\_\_\_ OR Help Build a New Grandview: \_\_\_\_  
OR Future Strategic Priorities: \_\_\_\_

Please add me to the Grandview Children's Foundation: ☐ E-newsletter List ☐ Mailing List

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I WOULD LIKE TO MAKE A SPECIAL SINGLE GIFT:** Please find enclosed my gift of:

☐ \$25 ☐ \$50 ☐ \$100 ☐ \$50 ☐ \$1000 or ☐ Other \$ \_\_\_\_\_ OR

**I WOULD LIKE TO HELP CHANGE LIVES BY JOINING THE LIFE CHANGERS MONTHLY GIVING PROGRAM:**

☐ \$10 ☐ \$25 ☐ \$50 ☐ \$100 or ☐ Other \$ \_\_\_\_\_

**I WOULD LIKE TO MAKE A TRIBUTE GIFT:**

☐ In honour of: \_\_\_\_\_ ☐ In memory of: \_\_\_\_\_

Personal message to be added to the card:

\_\_\_\_\_

\_\_\_\_\_

Send gift notification to (name): \_\_\_\_\_ DEADLINE DATE: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### PAYMENT INFORMATION:

*A tax receipt will be issued for donations that are \$10 or more*

☐ I've enclosed my cheque for my **special single gift** made payable to: **Grandview Children's Foundation**

☐ **Monthly Giving:** I've enclosed a blank cheque marked VOID. I authorize the Grandview Children's Foundation to withdraw the amount I have specified on the 1st of every month from the account number on the cheque.  
(NOTE: A tax receipt will be issued after the end of each calendar year.)

**OR**

☐ Please charge the amount specified above to my: ☐ Visa ☐ MasterCard ☐ American Express

Card No.: \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_ CSC \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail your completed donation form to Grandview Children's Foundation:**

**600 Townline Rd. S., Oshawa, Ontario, L1H 0C8 or Fax to: 905.728.2961**

**Charitable Registration #: 89105 8547 RR0001**

Please do not mail cash. Thank you for **Believing** in Grandview Kids!