

*Charitable Registration No. 10759 6306 RR0001*

*(Charitable Receipts will be issued for all donations received over $20)*

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|  **DONATION FORM** |
| Name |  |
| Address |  |
| City, Province |  |
| Postal Code |  |
| Email Address |  |
| Phone Number |  |
| **Donation Amount and Payment Type** |
| I would like to make a gift to \_\_\_\_\_\_\_\_\_\_\_\_ in the amount of **$** |
| Please circle one payment type: e-Transfer Cash Cheque Credit Card |
| Please make all cheques payable to: **Langs** |
| Please send e-Transfers to **katech@langs.org** & email **darcye@langs.org** with full donation details including the amount donated, your full name and address. This is important for tracking and receipting purposes. |
| Credit Card Number |  |
| Expiry |  |
| CVV |  |
| Signature |  |
| Date |  |
| **Type of Donation (Select One)** |
|  | Anonymous Donation | I do not wish to have my name listed in any donor recognition materials |
|  | Recognized Donation | I wish to have my name listed in donor recognition materials as follows:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Donation Allocation:** |

**Please return this form with payment to:**

**darcye@langs.org**

Langs, 1145 Concession Road, Cambridge, ON N3H 4L5

**THANK YOU FOR YOUR DONATION!**