



Camrose Women's Shelter Society

Camrose Women's Shelter Society Donation Form

Fundraiser _____

Date _____

Name _____

Address _____

City _____ Province _____ Postal Code _____

Phone _____ Email _____

Full name and address required for tax receipt. Receipts issued for donations of \$20 or greater.

Do you require a tax receipt (indicate "yes" or "no")? _____

Donation Amount \$ _____

Payment Method (select with "yes"):

Cheque _____ Cash _____ VISA _____ MasterCard _____

Credit Card # _____

Expiry Date # _____ CVV # _____
month year three digits on back

Please make cheques payable to: **Camrose Women's Shelter Society**

If you prefer to donate via e-transfer, please email donate@camrosewomenshelter.org with your contact information, including full name, address and email address. Please indicate if you would like an income tax receipt.

Thank you for your support!