Alberta SPCA Donation Form



Alberta SPCA 17904 118 Avenue NW Edmonton, AB T5S 2W3 Phone: 780-732-3746 Fax: 780-447-4748 http://albertaspca.org

| Name | | | | | | | | | |
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| Address | | | | | | | | | |
| City | | | | Postal Code | | | | | |
| Phone | | | | Email | | | | | |
| Type of Donat | ion* (ple | ase check | c one): | | | | | | |
| A.R.T. Month | ly Donor F | Program:** | □\$20 | □\$30 | □\$50 | Other \$ | | | |
| month or the subject to p cancelling a any debit do | e next bus roviding w PAD agree es not cor not author | iness day. I ritten notice ement, conta inply with this ized or is no | I understan of 15 days act your fina s agreemen of consisten | d that I can or more. The ncial institute t. For exam t with the F | n change or of the change or of the change o | count or credit of cancel this more inple cancellation inpay.ca. You ha the right to rece int. For more inf | othly donation a or form or learn ove certain reco eive reimbursei | at any time, more about urse rights if ment for any | |
| Signature | | | | Date _ | | | | | |
| ☐ Single Gift: | □ \$25 | □\$50 | □\$100 | □\$200 | Other \$_ | | | | |
| ☐ Tribute Gift: ☐ Honour ☐ Memorial | □ \$25 | □ \$50 | \$100 | \$200 | Other \$_ | | | | |
| Gift in honou | r of | | NAME | | Send gi | ift letter 🔲 No | Yes (inform | ation required below) | |
| | | | NAIVIL | | | of Acknowledgess: | | | |
| Income tax recei Payment Infor Cheque or Mo | mation: | | | | | | a VOID cheque | | |
| Credit Card | VISA | MasterCard | | | | | | | |
| Card # | Card # Expiry Date / | | | | | | | | |

Cardholder Name ______ Signature _____