



Surrey Hospice Society

#101 13463 78 Avenue, Surrey, BC V3W 0A8

Phone: 604-584-7006 Fax: 778-591-9180

www.surreyhospice.com

Donation Form

CONTACT INFORMATION

First Name		Last Name	
Address	City	Province	Postal Code
Email		Phone	

DONATION INFORMATION

Donation Type <input type="checkbox"/> One-Time <input type="checkbox"/> Monthly (Visa or MasterCard only)
Donation Amount <input type="checkbox"/> \$100 <input type="checkbox"/> \$75 <input type="checkbox"/> \$50 <input type="checkbox"/> \$25 <input type="checkbox"/> Other: \$

PAYMENT INFORMATION

Payment Method <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard

CREDIT CARD INFORMATION

Card Number		
Expiry Date (MM/YY)	Card Verification Code (CVC)	Card Holder's Name

DONATION IN MEMORY

Name of Person Being Remembered	Send Acknowledgement to Family <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Family	
Family's Address	City	Province	Postal Code

ADMINISTRATION (FOR ADMINISTRATION USE ONLY)

GL Code	Name of Payment Processor
Notes	

Signature

Date (DD/MM/YYYY)

A tax receipt will be issued for all donations of \$25.00 or more.