

- My Annual Gift: \$** _____ Please make your cheque payable to: **Ontario 4-H Council** Charitable #13588 7727 RR0001
 - My Memorial Gift: \$** _____ Please make your cheque payable to: **Ontario 4-H Foundation** Charitable #88888 0226 RR0001
- _____ 4-H Association Endowment Fund
- In memory/honour (circle one) of Designate to Ontario 4-H Foundation Endowment Fund

Send acknowledgement to: Address _____

City _____

Prov _____

PC _____

- Monthly Gift (see reverse side)**

Gift Payment Information

Name

Address

City

Prov

PC

Email

Tel

I am giving by

Cheque

Visa

Mastercard

Card #

CVV

Expiry date

Name on Card

Signature

The information gathered here will only be used to process your donation unless you indicate otherwise. Our Privacy Policy is available at www.4-HOntario.ca/privacy-policy.

My Monthly Donation & Information

Monthly gift amount: \$15 \$30 \$50 \$100 Other: \$_____

Process my donation on the: 1st 15th Other: _____ day of each month

Name: _____ Tel: _____

Address: _____ City: _____

Prov: _____ PC: _____ Email: _____

I am giving by: Visa MasterCard PAD (attach void cheque)

Card number: _____

Expiry: _____ CVV: _____ Name on card: _____

Signature: _____ Date: _____

I understand that my donations will continue every month until I notify 4-H Ontario of any change. I can change or cancel my donation at any time.

Ontario 4-H Council

Charitable #13588 7727 RR0001

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