



Renfrew Educational Services Charitable Donation Form

Donor's Name (first/last): _____

Donor's Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: Business: _____ Home: _____

A Charitable Receipt for donations received will be issued by Renfrew Educational Services.

NOTE: All the above information (at least one phone number) must be supplied for a tax receipt to be issued.

Charitable Registration Number 10788 6129 RR0001

I/We hereby undertake to support Renfrew Educational Services in making outstanding educational opportunities available to children with special needs and typically developing children.

I/We pledge the following financial support:

One time gift (please specify amount) \$ _____

Per annum gift for three years \$ _____/per annum Total Gift: \$ _____

Payment Method:

Cash Cheque (Payable to Renfrew Educational Services)

VISA MASTERCARD

Cardholder name: _____

Card No.: _____ Expiry Date: _____

Signature of cardholder: _____

Notes: _____

Please mail or deliver your donation to:

**Renfrew Educational Services
2050 - 21 Street NE
Calgary, AB T2E 6S5**

For office use only:

Campaign: _____ Fund: _____ Appeal: _____

Received by Finance: ____/____/____ Sent to Fund Development: ____/____/____