Canadian Cancer Society | CIBC RUN FOR THE CURE | CIBC

# 2022 DONATION FORM

Grande Prairie

## PARTICIPANT INFORMATION (Please print clearly. *Required information)

Participant ID

*First Name _____ *Last Name _____

Suite/Apt _____ *Street _____ *City _____ *Prov _____ *Postal Code _____

*Email _____ *Phone _____

## TEAM INFORMATION (If applicable)

Team ID

Team Type ☐ Corporate ☐ Friends & Family ☐ School Team ☐ Women's ☐ Team CIBC Banking Centre Transit/LOB

Team Name _____ Team Captain's Name _____

**TAX RECEIPT INFORMATION**
- Receipts will be issued for donations of $20 or more. Less than $20, must be requested.
- Donor's name and address must be complete and legible to receive a tax receipt.
- Donations must be received by December 31, 2022 to receive a 2022 tax receipt.

## DONATION INFORMATION (Make cheques payable to **Canadian Cancer Society**)

| First Name | Last Name | | | | Donation Amount ($) | Tax Receipt Required | Language Preference |
|---|---|---|---|---|---|---|---|
| Suite/Apt # | Address | City | Prov | Postal Code | | ☐ Yes | ☐ English |
| Email | Phone# | | | ☐ Cash ☐ Cheque ☐ Team Donation | ☐ Was this money raised through a fundraising activity** | ☐ No | ☐ French |
| First Name | Last Name | | | | | ☐ Yes | ☐ English |
| Suite/Apt # | Address | City | Prov | Postal Code | | | |
| Email | Phone# | | | ☐ Cash ☐ Cheque ☐ Team Donation | ☐ Was this money raised through a fundraising activity** | ☐ No | ☐ French |
| First Name | Last Name | | | | | ☐ Yes | ☐ English |
| Suite/Apt # | Address | City | Prov | Postal Code | | | |
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If you wish to make a donation to the CIBC Run for the Cure using a credit card, please visit www.cibcrunforthecure.com or telephone 1-888-939-3333 to speak with a Donor Care representative.

$ **TOTAL DONATIONS** (this form only)

** This money was raised through a fundraising activity (garage sale, bake sale, office fundraiser, etc.) not an individual donation.

### WHAT TO DO WITH YOUR FORMS & DONATIONS

1. Bring cash/cheque donations and forms to a CIBC banking centre.
2. Get forms bank stamped by a CIBC teller. Keep forms — do not leave forms at CIBC.
3. Make copies of all forms for your records.
4. Mail bank stamped forms to:
   **Canadian Cancer Society**
   Attn: Gift Processing Department
   55 St Clair Avenue West, Suite 500, Toronto, Ontario M4V 2Y7
   (Please do not mail cash)

The CIBC Run for the Cure, daffodil and pink ribbon ellipse are trademarks of the Canadian Cancer Society. The CIBC logo is a registered trademark of CIBC.
Charitable Registration No. 118829803 RR 0001

CIBC BANK STAMP HERE

TOTAL DEPOSITED AT CIBC (this form only)

$ _____

### CIBC CUSTOMER SERVICE REPRESENTATIVE INSTRUCTIONS

1. Forms are accepted year round.
2. Ensure that this form is filled out in full with participant name, contact information, postal code and email address
3. Make deposit in CBFE using Deposit under the Business Services option from the left navigation. DO NOT use the Client Banking, Search Client screen
4. Enter transit no. 112 and donation account
   09-91805
5. Verify amount of the deposit and enter it on this form
6. **DO NOT PROCESS PAYMENTS BY CREDIT CARD**
7. Return stamped form to participant