

2023 DONATION FORM

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
 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 August 31, 2023 to receive a 2023 tax receipt.

DONATION INFORMATION (Make cheques payable to Canadian Cancer Society)						Donation Amount (\$)	Tax Receipt Required	Language Preference
First Name	Last Name					<input type="checkbox"/> Was this money raised through a fundraising activity**	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> English <input type="checkbox"/> French
Suite/Apt #	Address	City	Prov	Postal Code				
Email	Phone#	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Team Donation						
First Name	Last Name					<input type="checkbox"/> Was this money raised through a fundraising activity**	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> English <input type="checkbox"/> French
Suite/Apt #	Address	City	Prov	Postal Code				
Email	Phone#	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Team Donation						
First Name	Last Name					<input type="checkbox"/> Was this money raised through a fundraising activity**	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> English <input type="checkbox"/> French
Suite/Apt #	Address	City	Prov	Postal Code				
Email	Phone#	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Team Donation						
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Suite/Apt #	Address	City	Prov	Postal Code				
Email	Phone#	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Team Donation						
First Name	Last Name					<input type="checkbox"/> Was this money raised through a fundraising activity**	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> English <input type="checkbox"/> French
Suite/Apt #	Address	City	Prov	Postal Code				
Email	Phone#	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Team Donation						

If you wish to make a donation to Relay For Life using a credit card, please visit www.relayforlife.ca 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

(Please do not mail cash)

Charitable Registration No. 118829803 RR 0001

<p style="font-size: 2em; color: #ccc;">CIBC BANK STAMP HERE</p>	<p>TOTAL DEPOSITED AT CIBC (this form only)</p> <p><input style="width: 100%;" type="text"/></p> <p>\$</p>	<p>CIBC CUSTOMER SERVICE REPRESENTATIVE INSTRUCTIONS</p> <ol style="list-style-type: none"> 1. Forms are accepted year round 2. Make deposit in CBFE using Deposit under the Business Services option from the left navigation. DO NOT use the Client Banking, Search Client screen 3. Enter transit no. and donation account 4. Verify amount of the deposit and enter it on this form 5. Return stamped form to participant
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