

contribution form

words of Peace C A N A D A

A I wish to make a **monthly** contribution to *Words of Peace Canada* in the amount of \$ _____

Please make the monthly withdrawal on the: 1st of each month 15th of each month

Start date: __/__/__
dd/mm/y y

B I wish to make a **one-time** contribution to *Words of Peace Canada* in the amount of \$ _____

Please apply my contribution to: The TV Broadcast

Other _____

Payment information

To give by monthly bank withdrawal (recommended), please complete the separate PAD agreement and enclose a void cheque

Credit card

Name: _____
(enter name as it appears on card)



Card no: _____

Expiry: __/__/__
mm/y y

Personal cheque(s)

Payable to *Words of Peace Canada*

(attach and postdate where applicable)

Personal information

Name: _____
(enter both names if you are contributing as a couple)

Street address: _____

City: _____

Province: _____ Postal code: _____

Phone: _____ Email: _____

Signature: _____ Date: __/__/__
dd/mm/y y

Send to: Words of Peace Canada, 119-660 Eglinton Ave. E., Suite 413, Toronto, ON M4G 2K2

FAX: (416) 695-7077

Email: wopc@rogers.com

(contributions to Words of Peace Canada are not tax deductible)