



Donation Form

Thank you for supporting BullyingCanada!

(Please print legibly to ensure we can correctly process your donation. Thank you!)

Personal Information:

Organization: _____

(Mr./Mrs./Miss.) First: _____ Last: _____

Address: _____

City, Province _____ Prov. _____ Postal Code: _____

Telephone: _____ Email: _____

I would like to give a **single gift** of: \$ _____ I would like to give a **Monthly Donation** of: \$ _____

Individual Donation: _____ Group Donation: _____ Corporate Donation: _____

Other: _____: _____

Payment Choices:

Card Type: VISA MasterCard American Express Visa Debit Cheque / Money Order

Card Number: _____ / _____ / _____ / _____

Expiry Date: ____ / ____ / ____ Security Code: _____

Card Holder: _____

For In Memory or In Honour Donations, please fill in below:

Memory / Honour of: _____

From: _____

Acknowledgement preference: In Honour Card In Memoriam Card

Send The Card:

(Mr./Mrs./Miss.) _____

Address: _____

City, Province _____ Postal Code: _____

Message: _____

The information we collect is used to process donations, keep our donors informed about our work, and ask for their support to continue to provide services for youth from across Canada. If at any time you wish to be excluded from such communications, please contact us at: DonationServices@BullyingCanada.ca, or 1-877-459-7413. Please visit our Website for a copy of our privacy policy. In an effort to continue to be there when we are needed most, we exchange our mailing list with other reputable charities to encourage the support of new donors. If you would not like to have your name and address to be shared, please click here ____.

Please mail your Donation and this form: BullyingCanada, 471 Smythe St, BOX 27009, Fredericton, NB E3B 9M1.