



2017 GENERAL DONATION FORM

Secure online donations can be made at www.miningformiracles.ca
Click the "Donate Today" button on the home page.

PLEASE PRINT CLEARLY TO RECEIVE A TAX RECEIPT*:

Donation Type: Individual Corporate

If "Individual," a tax receipt will be issued in the name of the "Contact Person" identified below. If "Corporate," the tax receipt will be issued in the name of the company.

Company: _____

Contact Person: _____

Address: _____

Phone Number: _____ Email: _____

I/We wish to donate \$_____ in the following manner:

- Cash Cheque (payable to BC Children's Hospital Foundation)
 Payroll Deduction Visa MasterCard AMEX
 Online at www.miningformiracles.ca
 Gift of Securities (stocks, bonds, mutual funds)

Contact Wilma Van Andel at 604-875-2345 Ext. 5889 or wvanandel@bcCHF.ca for more information

Cardholder Name: _____

Card Number: _____

Expiry Date: _____

Cardholder Signature: _____

Consider making a gift in your will to support BC Children's Hospital.

- Yes! I've already made a gift in my will to BC Children's Hospital.
 Yes! Send me information about making a gift in my will to BC Children's Hospital.

Please return this form to:

Veronika Spencer, BC Children's Hospital Foundation, 938 West 28th Avenue, Vancouver, BC V5Z 4H4
Phone: 604-875-2504 | Fax: 604-875-2596 | Email: vspencer@bcCHF.ca

*Donations of \$20 and over will receive a tax receipt from BC Children's Hospital Foundation.