



Donation Form

Name of Donor:

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Tax receipts for donations over \$20 will be mailed.

Amount enclosed: _____

In Memory Donations:

Donations can be made in memory of a loved one. Your memorial gift is a fitting way to express love, thoughtfulness and remembrance. An acknowledgment will be sent to the family, with the name of the donor indicated.

In memory of: _____

Send acknowledgement card to:

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Please mail completed form and cheques payable to:

Powell River Hospice Society
P.O. Box 33, Powell River, BC, V8A 4Z5

Thank you for your kind donation!