



Donation Form

I would like to support CMHA Vernon by making a:

- Personal Donation Corporate Donation

Donation of:

- Monthly* gift of:
 \$10 \$20 \$30 \$50 \$100 Other \$ _____
 Make my donation on the: 1st or 15th of each month

- One-time donation of:
 \$50 \$100 \$250 \$500 Other \$ _____

I would like my gift designated to:

- Greatest Need
 Crisis Line
 Education
 Family Support
 Nutrition & Kitchen Program
 Youth Programs
 Men's Shed

Mr. Ms. Mrs. Miss Dr. First Name: _____ Last Name: _____

Address: _____ City _____ Postal Code _____

Phone: (_____) _____ - _____ Email: _____

I would like to pay by:

- Cheque payable to Canadian Mental Health Association, Vernon Branch
- VISA Card no: _____/_____/_____/_____ Expiry date: _____/_____
- MasterCard Name as written on card: _____
- Signature: _____ 3-digit security code (CVC) _____

- Please keep my donation anonymous
 Please send me updates from CMHA Vernon
 I would like to learn about including CMHA Vernon in my will

Please feel secure. We only use your personal information to provide services and to keep you informed and up to date on the activities of CMHA including programs, services, special events, funding needs, opportunities to volunteer or to give, and more through periodic contacts. If at any time you wish to be removed from any of these contacts simply contact us by phone at 250-542-3114 or at cmha@cmhavernon.ca

We do not trade or sell our donor lists.

Tax receipts will be issued for donations of \$20 or more unless otherwise requested.

* For monthly donations by cheque, please send a cheque marked "void" and this completed card by mail. Your charitable receipt will include all monthly donations made, to Dec. 31st for each calendar year. You can increase, decrease, cancel or restart your monthly donation at any time by notifying us at 250-542-3114 ext. 224

Thank you!

Please send your completed form our office at the address below:

Canadian Mental Health Association,
 Vernon Branch
 3100-28th Ave
 Vernon, BC V1T 1W3
 Tel: 250-542-3114
 Fax: 250-549-8446
 Email: cmha@cmhavernon.ca

Charitable Registration
 No. 10686 3731 RR 0001

www.cmhavernon.ca