



All funds raised stay in Manitoba.

# REMAX Burgers for Breast Cancer BBQ

**DONOR INFORMATION for the official tax receipt** (*Mailing address required – including for electronic receipts*)

**PLEASE PRINT:**

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

*If this is a business donation and you would like the tax receipt in your company name, please check here* \_\_\_\_\_

**Company Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Prov** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**Phone (mandatory for credit card payments) Day** \_\_\_\_\_ **Eve** \_\_\_\_\_

*To receive your tax receipt by email, please provide your email below.*

**Email** \_\_\_\_\_

## PAYMENT INFORMATION

Enclosed is my/our gift of: \$ \_\_\_\_\_ *Tax receipts automatically sent for gifts of \$15 or more.*

Please make your cheque payable to the **CancerCare Manitoba Foundation**

### For Credit Card Payments

**Card #** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Expiry Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Card Holder Name:** \_\_\_\_\_

**We would like to keep in touch. Please check one of the following options**

- Please keep me informed on all fundraising activities
- Please mail newsletters only
- Please do not send any mail or contact me by phone

**For our Privacy Policy, please visit [cancercarefdn.mb.ca](http://cancercarefdn.mb.ca)**

**THANK YOU FOR SUPPORTING CANCERCARE MANITOBA FOUNDATION.**