

PARTICIPANT / TEAM: \_\_\_\_\_

**WHEN COMPLETING THIS FORM**

- Please **print** all information, and include your donation with this form
- For tax receipt purposes, all donor information, including postal code, must be provided
- Forward to: **BC Cancer Foundation, 2560 Heather Street, Vancouver, B.C., V5Z 0A6**

Attention: Jennifer Northrup, Special Events

**DONOR INFORMATION**

Company Name (for business donations): \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**DONATION INFORMATION** (Tax receipts are issued for donations of \$10 or more)

Yes, I would like my name to appear on the online fundraising page (if applicable)

Yes, I would like my donation amount to appear on the online fundraising page (if applicable)

Amount: \$ \_\_\_\_\_

Cheque or cash enclosed (cheque made payable to BC Cancer Foundation)

Credit card information provided below

Visa       MasterCard       American Express

Name as it appears on card: \_\_\_\_\_

Card Number: \_\_\_\_\_ / \_\_\_\_\_

The BC Cancer Foundation respects your privacy and adheres to legislated privacy requirements. The personal information we collect about you may be used to deliver BC Cancer Foundation programs and services and to periodically inform you of funding needs, opportunities to volunteer or donate, special events, lotteries and surveys. On occasion we publicly recognize the names of our donors. If we do not hear from you before our next mailing we will take this as consent to collect and use your personal information for these purposes. If at any time you do not consent to having your personal information used for the purposes set out above please contact us at 604-877-6040 (in the Lower Mainland or outside of B.C.), 1-888-906-CURE (2873) toll free or email [infobccf@bccancer.bc.ca](mailto:infobccf@bccancer.bc.ca). We have not, nor will we ever, sell, trade or rent-out any names or personal information.