



HERITAGE PARK SOCIETY DONATION FORM

Natural Resource Project

DONOR INFORMATION

FIRST NAME:

LAST NAME:

Donation is on behalf of a company

COMPANY NAME:

ADDRESS:

CITY:

PROV:

POST:

PHONE:

EMAIL:

RECOGNITION NAME:

I wish to remain anonymous Please contact me about future programs and events at Heritage Park.

DONATION INFORMATION

I WOULD LIKE TO DONATE A ONE TIME GIFT OF: \$

TAX RECEIPT REQUIRED Yes No

PAYMENT INFORMATION

CHEQUE ENCLOSED (PAYABLE TO HERITAGE PARK SOCIETY)

VISA MASTERCARD

NAME ON CARD:

CARD NUMBER:

EXPIRY DATE:

Thank you for your support!