



*A Service of the United Way of Saskatoon and Area*

## **DONATION FORM**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ PHONE #: \_\_\_\_\_

AMOUNT DONATING: \$ \_\_\_\_\_

PLEASE CHECK ( ) ALL APPLICABLE SPACES:

Paying by ( ) cheque (*Make cheques payable to Volunteer Saskatoon*)

( ) credit card ( ) VISA ( ) MasterCard

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

Expiry Date: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

Mail to: Volunteer Saskatoon  
100 - 506 25<sup>th</sup> Street East  
Saskatoon, SK S7K 4A7

Fax to: (306) 244-0583

*Receipt will be issued by the United Way of Saskatoon and Area*