



Donation Form



Please print, complete and mail this form to:

Hamilton/Burlington SPCA
245 Dartnall Road
Hamilton, ON L8W 3V9

Fax: 905-574-9087
Phone: 905-574-7722

Charitable Registration #: 11923 6750 RR0001

Donor Information

Salutation: Mr. Mrs. Ms. Dr. Other: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Phone: _____ Email: _____

Tribute Information (If making a tribute gift, please complete this section)

In Memory of: _____

In Honour of: _____ Honour Reason: _____

Please send Acknowledgement Card to:

First Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

I would like my donation to go:

Animal Care Animal Protection Education & Outreach

I would like to make a One Time Gift of:

\$20 \$30 \$50 \$100 Other \$ _____

Gift Type: Cheque enclosed payable to the HBSPCA Credit Card (*provided below*)

'Friends for Life' Monthly Giving Program

Please withdraw: \$10 \$20 \$25 Other \$: _____ On the: 1st or the 15th of the month

Enclosed is a blank cheque marked VOID Credit Card (*provided below*)

Payment Information Credit Card Type: Visa MasterCard American Express

Credit Card Number: _____ Expiry Date: _____ CVV: _____

Signature: _____ Date donation made: _____

On behalf of all the animals at the HBSPCA, thank you!