

Monthly Donation Form

Personal Information

Name: First Name Last Name
Street Address:
City/Town: Province: Postal Code:
Email: Phone: ()
Please send me updates about the Foundation and its African partners by: 🗖 email 📮 lettermail 📮 no updates, thanks
Donation Information
Monthly gift amount: ☐ \$15 ☐ \$30 ☐ \$50 ☐ \$100 ☐ Other: \$
Process my donation on the: \Box 1st \Box 15th of each month
This donation is made by: \square an individual \square a business
I prefer to give by:
Credit Card
Card type: ☐ Visa ☐ MasterCard ☐ American Express
Card #: Expiry (mm/yy):/
Name on card:
Signature: Date :
I understand that my donations will continue automatically each month until I notify the Stephen Lewis Foundation of any change. I can change or cancel my monthly donation at any time.
Pre-Authorized Debit (PAD)
Please attach a void cheque.
Signature: Date:
I may revoke my authorization at any time, subject to providing notice of 15 days. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit www.cdnpay.ca.
I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.

The Stephen Lewis Foundation respects the privacy of its donors; we do not sell, rent or trade our donor lists.

If you would like to change the way we communicate with you, please email us at info@stephenlewisfoundation.org or call 1-888-203-9990, ext. o.

A tax receipt will be issued for all donations of \$20 or more. For monthly donors, official tax receipts are issued in February for the total year's donation.