



**DONATION FORM**

Charity #: 10777 1727 RR0001

Mail to: Nova Vita, 59 North Park Street  
Brantford, ON N3R 4J8

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

Donation Frequency:  **One-Time Donation**

**Monthly Donation**  
(deduct monthly from my bank account or credit card)

Message and/or Instructions for Nova Vita:

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**Dedications & Gift Options:**

Would you like to dedicate this donation?

Yes, as a gift in memory of \_\_\_\_\_

Yes, as a gift in honour/on behalf of \_\_\_\_\_

**Tax Receipt and Privacy Information:**

Donor Type:       Personal       Corporate/Group

Title: \_\_\_\_\_

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

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

Company Name/Group: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_

Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

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

**Add Me to the Mailing List:**

Email                          Mail   

**How Would You Like To Have Your Receipt(s) Created?**

- One receipt for the entire donation made out to the above information provided.
- Separate receipts for each individual in our group. Please contact me for individual information.
- One receipt at the end of the year for all donations made this year  
*(repeated donations only).*

**Payment Method**

I would like to make my donation using the following payment method:

- Cheque or Money Order (enclosed) – VOID cheque for monthly bank withdrawals
- Credit Card (VISA, Mastercard, American Express)

Name (on card): \_\_\_\_\_ Expiry: \_\_\_\_\_ CSV: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_