

**ALZHEIMER SOCIETY OF SARNIA-LAMBTON
DONATION FORM -- MAIL-IN CONTRIBUTIONS**

Thank you for supporting the Alzheimer Society of Sarnia-Lambton!
Your donation is greatly appreciated.
Please print out this page and mail it in with your donation.

My gift is in the amount of \$ _____

My gift is designated to: Donation In Memory of In Honour of Capital Campaign

Name: _____

Address _____ City _____

Prov/State _____ Postal/Zip _____ Phone Number _____

E-mail address: _____

IN MEMORY OF DONATION

Please send a card to the following person or family letting them know I have made a donation to the Alzheimer Society of Sarnia-Lambton

IN MEMORY OF _____

Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____

IN HONOUR OF DONATION

Please send a card to the following person or family letting them know I have made a donation to the Alzheimer Society of Sarnia-Lambton

IN HONOUR OF (Name) _____

ON THE OCCASION OF (e.g. retirement, birthday, anniversary, etc.) _____

Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____

Please make your cheque payable to the ALZHEIMER SOCIETY OF SARNIA-LAMBTON
and mail it and this form to:

*Alzheimer Society of Sarnia-Lambton
420 East Street North
Sarnia, ON N7T 6Y5*

Thank you very much for your support! Income tax receipts will be issued for all donations.
Charitable Registration # 11900-4513-RR0001