



Donate Now

My Gift

- Please accept my gift of: \$ _____
- I wish to make monthly contributions of: \$10 \$15 \$25 \$50 Other _____

Donor Information

Dr./Mr./Mrs./Ms. First Name Surname

Mailing Address

City Province Postal Code

Home Telephone E-mail

Signature

Recognition (choose one)

- Please recognize my gift under the name: _____
- I do not wish to receive any public recognition

Payment Options

- Cheque made payable to DIVERSEcity Community Resources Society Cash
- Pre-authorized debit (enclose voided blank cheque)
- Visa Mastercard

Name on Card: _____

Card # _____

Expiry Date _____

I would like to my donation to be used to support :

- | | |
|--|--|
| <input type="checkbox"/> General support to DIVERSEcity where needed | <input type="checkbox"/> Settlement and Community Programs |
| <input type="checkbox"/> Counselling Services | <input type="checkbox"/> Employment Services |
| <input type="checkbox"/> Children's Programs | <input type="checkbox"/> Language Programs |
| <input type="checkbox"/> Senior's Programs | <input type="checkbox"/> Francophone Settlement Services |
| <input type="checkbox"/> Refugee Programs | |

All donation of \$20 or more will be issued a charitable donation receipt.

Charitable Registration # 119206589RR0001

Contact: Lori Douglas at ldouglas@dcrs.ca or 604-547-1201