



Mail-in Donation Form

Revised 2019 08 14

Formerly Hospice King-Aurora-Richmond Hill

Charitable Registration 13451 7820

DONATION INFORMATION:

Donation amount: \$ _____ **Official tax receipt will be sent to donor**

Donor name: _____

Address: STREET CITY PROV P CODE

Email Phone

METHOD OF PAYMENT:

I am enclosing a cheque payable to: **Hope House Community Hospice**
Please debit my Visa Mastercard with the amount indicated above

Credit card number _____ Expiry Date _____

Cardholder's name _____

Signature _____ Date _____

TRIBUTE INFORMATION (Optional):

Please indicate: memorial donation in honour of/celebration donation I do not wish this donation to be acknowledged

Donation made in memory/honour/celebration of _____
name of person

Acknowledgement card will be sent to _____
ie.name of family member(s)

STREET CITY PROV P CODE

PLEASE MAIL TO: Hope House Community Hospice
350 Industrial Pkwy South Unit 4
Aurora, ON L4G 3V7

Donations can also be made by
calling 905-727-6815 or online
at www.hopehousehospice.com

*Many thanks for helping us to support those diagnosed with life-threatening illness,
the people who care for them and those who are bereaved.*