



5K YOUR WAY DONATION FORM

Please mail this form with your donation to:
The Princess Margaret Hospital Foundation
610 University Avenue Toronto ON M5G 2M9
Fax: 416.946.6563

- Please make cheques payable to PMHF
- Each cheque or credit card donation must come with its own donation form
- In the 'memo' section of your cheque, please write the name of the participant you are choosing to support
- If you donate \$15 or more, you will receive a tax receipt

Name Of Participant You're Supporting: _____

1. Print your name clearly, as you wish it to appear on your tax receipt.

First Name		Last Name	
Company Name			
Suite/Apt. No.		Mailing Address	
City	Province	Postal Code	
Phone (Mandatory for Credit Card Payments)		Email Address (To receive tax receipt by email)	

2. Choose Your Donation Amount \$ _____

- Check this box if you prefer not to show the amount of your gift on the participant's Honour Roll.
- Check this box if you do not want your name to appear on the website's Honour Roll.

3. Two Easy Payment Options

1. **Personal Cheque – Please make cheques payable to: Princess Margaret Hospital Foundation.** Please include participant name on all cheques.
2. **Credit Card (Visa, MC, Amex)**

Card Number	Expiry Date	Signature
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If you have any questions, please contact the
5K Your Way Hotline at: 416.946.6584 or email 5kyourway@pmhf.ca
www.5kyourway.ca

Charitable Number 88900 7597 RR0001

Privacy Note: The Princess Margaret Hospital Foundation respects your privacy. We do not trade, rent or sell the names of our valued supporters. Should you wish to be removed from our fundraising list(s), please contact us at 416.946.2114 or email us at list.removal@pmhf.ca