

DONATION FORM

Science World British Columbia

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Charitable BN 10673 4809 RR0001

Please return your completed donation form to:

the address listed above
c/o Development Office

For more information contact:

604.443.7483 or

giving@scienceworld.ca

YES! I WOULD LIKE TO HELP INSPIRE THE NEXT GENERATION OF SCIENTISTS AND INNOVATORS IN BRITISH COLUMBIA WITH A DONATION TO SCIENCE WORLD.

A. DONATION

I would like to make a one-time donation of: \$ _____

I would like to become a monthly donor (payment details in next section)

This gift is:

In memory of _____

In honour of _____

On occasion of _____

B. PAYMENT OPTIONS

I have enclosed cash or a cheque made payable to ASTC Science World Society

Visa Mastercard

Card no.: _____ Security code: _____ Exp. date: _____

Name on card: _____

Signature: _____

C. MONTHLY DONATIONS

Please bill my credit card \$ _____ on the _____ day of each month.

I have enclosed a void cheque for automatic bank withdrawal.

D. DONOR INFORMATION

Title: Mr Mrs Ms Miss Dr

First name: _____ Last name: _____

Address: _____

City, Province: _____ Postal code: _____

Telephone: _____ Email: _____

Science World will recognize your donation using the name(s) as noted above.

I/we wish to remain anonymous

A charitable tax receipt will be issued upon receipt of your donation.

I'd like to stay up-to-date with future Science World events and programs and exclusive VIP opportunities via email.

Please send me information on how to make a gift to Science World in my Will.