

DONATION FORM

Community One Foundation (formerly the Lesbian & Gay Community Appeal)



☐ **YES!** I want to help the Foundation continue to support our **LGBTTIQQ2S** communities.

1. CONTACT INFORMATION (Full mailing information is required for tax receipting purposes.)

Donor's Name: _____

Donor's Address: _____

Unit/Apt: _____

City: _____

Prov: _____

Postal Code: _____

Telephone: _____

Fax: _____

Email: _____

2. FREQUENCY OF DONATION

☐ **One-time gift**

☐ **Monthly** at the beginning of the month

☐ **Monthly** in the middle of the month

3. DONATION AMOUNT

☐ \$50 ☐ \$100 ☐ \$250 ☐ \$500 ☐ \$750 ☐ \$1,000 ☐ \$2,500 ☐ \$5,000 ☐ Other \$ _____

4. TYPE OF DONATION

☐ **Regular Donation** – Tax receipt provided for full amount of donation

☐ **General Fund** – NO tax receipt provided as funding to projects without charitable status, so no tax receipt can be issued. Artists and emerging groups are usually funded from the General Fund.

☐ **Split Donation** – Regular Donation Amount: \$ _____ General Fund Amount: \$ _____

5. METHOD OF PAYMENT

☐ My personal cheque is enclosed

☐ My VOID cheque is enclosed for monthly direct withdrawals

☐ Please charge my credit card (for one-time and monthly donations):

☐ Visa

☐ Mastercard

Card #: _____

Expiry: _____

/

Name on Card: _____

Signature: _____

(Donations using an American Express card can be made online only at www.communityone.ca)

6. PERMISSION

The Foundation may publicly acknowledge your generous support, so if you wish your donation to remain anonymous, please indicate so below.

- ☐ I wish my donation to remain anonymous
- ☐ I wish my donation to be made in memory or celebration of _____

Special instructions for notification of donation (we can send a card notifying a person that a donation has been made in memory or in celebration):

7. REQUEST FOR MORE INFORMATION

- ☐ I am interested in helping to start a permanent LGBT Community Endowment Fund, so send me more Information.
- ☐ I am interested in making a bequest in my will, send more information

8. SUBMIT COMPLETED FORM

☐ Mail in to:

Community One Foundation
PO Box 760 – Station F
Toronto, CANADA
M4Y 2N6

☐ Or, Scan and/or Email to:

donate@communityone.ca

THANK YOU FOR YOUR GENEROUS SUPPORT!

Please complete and return this form as soon as possible. We'll put your donation to work right away.

The Community One Foundation is committed to protecting your privacy. We do not rent, barter, sell or exchange our mailing lists with third parties. Periodically we will send you information to keep you informed of events and/or fundraising opportunities in support of the Foundation. Please contact us at **(416) 920 5422 or info@communityone.ca** if you do not wish to receive such information.

The registered charitable number is 126482785RR0001.

