DONATION FORM

(Please print clearly)

DONOR INFORMATION FOR TAX RECEIPT:	
DATE:	
NAME: _ _ _ _	
ADDRESS:	
CITY:	
	POSTAL CODE:
PHONE #:	EMAIL:
AMOUNT OF DONATION: \$	
☐ BEAR SHARES shares at \$50 per	share \square MAIL \square PICK-UF
Purchase 5 shares: Certificate, Wellness to Purchase 10 shares: Certificate, Wellness (good for one visit each)	Ficate, One FREE INDIVIDUAL PASS (good for one visit) to Wilderness DVD to Wilderness DVD, two FREE INDIVIDUAL DAY PASSES Wellness to Wilderness DVD, five FREE INDIVIDUAL

Please send cheque to:

North Island Wildlife Recovery Association Box 364, 1240 Leffler Road, Errington, BC VOR 1V0