

donation form

le
DOMAINE
Forget

Yes, I wish to help support le Domaine Forget

CONTACT INFORMATION :

Last Name and First Name: _____

Company or business name (if applicable): _____

Telephone (work) : _____ (home) : _____

Address (home or work): _____

City : _____ Postal Code : _____ Email : _____

I wish to donate \$ _____ total, details as follows:

- Annual contribution of: \$ _____ 2 years **OR** 5 years.
 One total contribution of: \$ _____

METHOD OF PAYMENT

By cheque to the order of: **Domaine Forget**
(Send me a reminder or an annual statement each _____ of _____)

The first payment is included

OR

The first payment to be paid on ____ / ____ / ____ (dd/mm/year)

Visa MasterCard

Card Number: _____

Name on the card: _____ Expiration date: ____ / ____

GIFT ALLOCATION

No particular designation

OR I would like my gift to be used for: (if more than one choice, the contribution will be allocated equally)

- Domaine Forget Jacqueline et Paul Desmarais Scholarship Fund
 Dedicated fund for artistic activities
 Educational activities and upgrading the François-Bernier Concert Hall
 Enhancement and conservation of the historic and heritage site
 Harmonic Sculpture Garden

My gift is confidential

The amount of my gift is confidential

I understand that I can change or cancel my contribution anytime

Donor's signature

Date