

TARGET THE HOOD DONATION FORM



YES

I want to make a contribution to the Robin Hood Association.

Please complete and return the form below.

My Monthly Gift:

- \$10 \$25 \$50 \$ _____
per month per month per month per month

Please enclose a VOID cheque for monthly contributions.

A consolidated tax receipt will be issued at the end of each tax year.

My One Time Gift:

- \$25 \$50 \$100 \$ _____

Please charge my one-time contribution of \$ _____ to my:

- VISA MasterCard Cheque*

Credit Card Number: _____

Expiry Date: _____/_____

Name on Card: _____

Cardholder's Signature: _____

Email: _____

- Yes, you may contact me by email.

**Please make cheques payable to 'Robin Hood Association for the Handicapped'
Tax receipts for gifts under \$25 will be issued upon request.*

For more information:

Robin Hood Association
141 Broadway Blvd
Sherwood Park, AB T8H 2A4
p. 780.467.7140 f. 780.449.2028
e. reception@robinhoodassoc.com
robinhoodassoc.com

To make a secure online donation, visit:
robinhoodassoc.com/content/6/Donate

Charitable Registration #: 107906091 RR0001