

Yes, I want to help bring independence to people with physical disabilities

Please fill in all information and mail or fax it to our office at:

Attention: Fund Development  
 March of Dimes Canada  
 202-885 Don Mills Rd  
 Toronto, ON M3C 1V9  
 Fax: 416-425-1920

**Thank you!**

### My Personal Information

Title:	First Name:	Last Name:	
Street Address (#, street, suite/apt):			
City:	Prov/State:	Postal/Zip Code:	Country:
Home phone:	Work Phone:	E-mail Address:	

### Type of Donation

**Single Donation** I would like to make a one-time donation now in the amount of:

\$25  \$35  \$50  \$75  \$100  \$250  Other amount \$

**Monthly Dime Plan Donation:**

I want to make monthly gifts of:

\$5  \$10  \$15  \$20  \$25  Other amount \$

Please debit gifts from my bank account on the  15<sup>th</sup> or  30<sup>th</sup> of each month

My sample black cheque marked VOID is enclosed OR

Please charge these donations to my  VISA  Mastercard  American Express

You may cancel anytime by calling 1 800-263-3463 or by e-mailing [donations@marchofdimes.ca](mailto:donations@marchofdimes.ca)

### Payment Options

I would like to pay by Credit Card:  VISA  MasterCard  AMEX

Card Number	Expiration Date
Cardholder name (exactly as shown on card)	Cardholder Signature (please sign after printing form)

I would like to pay by:  Cheque or  Money Order

Please find enclosed a cheque or money order in the amount of: \$ \_\_\_\_\_ .00

### Special requests

Do not trade name  Do not solicit by mail  Do not solicit phone  Solicit once a year

***Thank you for your support. We couldn't do it without you.***

**March of Dimes Canada**

202-885 Don Mills Rd, Toronto, ON M3C 1V9

Tel: 416-425-3463 ; Toll-free: 1-800-263-3463 ; Fax: 416-425-1920

E-mail: [donorservices@marchofdimes.ca](mailto:donorservices@marchofdimes.ca)

[www.marchofdimes.ca](http://www.marchofdimes.ca)

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