

# Yes, I would like to support the Foundation!

- I would like to make and designate a donation of (circle one)

\$25    \$ 50    \$ 100    \$ 250    \$ 1000    \$ \_\_\_\_\_

I would like this donation to go to

\_\_\_\_\_ the General Community Fund  
\_\_\_\_\_ Founders Fund (administrative endowment)  
\_\_\_\_\_ Other (specify) \_\_\_\_\_

- I would like to start an Emerging Fund with an initial gift of (circle one)

\$ 1000    \$ 2000    \$ 5000    (staff will contact you to follow up)

## DONOR INFORMATION (please print):

Name(s) for use on donor list: \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_  
e-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City & Province : \_\_\_\_\_ Postal Code: \_\_\_\_\_

## PAYMENT METHOD

- Cash  
 Enclosed is my cheque payable to Lethbridge Community Foundation  
 Please charge my VISA credit card:

Card number: \_\_\_\_\_ Expiry Date: \_\_\_\_ / \_\_\_\_  
Name on card: \_\_\_\_\_ Your Signature

## PROTECTING YOUR PRIVACY

The Lethbridge Community Foundation values your support. We also respect your privacy and are committed to protecting your personal information. The information you provide to us is used to process and acknowledge your gift, to provide you with relevant information about the organization, and to improve our fund raising and donor services. We also use your information in our donor recognition program by publishing donor names in our publications such as the Annual Report. We do not share with or sell our donor information to third parties. You may prefer to remain anonymous. If so, please indicate your preferences.

- we do not want our name(s) published in the Annual Report or elsewhere.

Signature (required): \_\_\_\_\_

Please print and mail this donor card to

Suite 506, 740 4 Avenue S. Lethbridge, AB T1J 4R7