



## DONATION FORM

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**Here is my charitable donation to Helping Hands:**

\$25       \$50       \$100       \$500       Other \$ \_\_\_\_\_

I would like to make a monthly pledge of \$ \_\_\_\_\_

I have enclosed posted dated cheques

Enclosed is my cheque in the amount of \$ \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

I wish to designate my donation to one of the following urgent Helping Hands priorities:  
(check one)

- |  |   |
|--|---|
| <input type="checkbox"/> Community Restaurant  | <input type="checkbox"/> School Back Pack Program |
| <input type="checkbox"/> Food Bank   | <input type="checkbox"/> wherever needed most     |
| <input type="checkbox"/> Please ensure that my donation to Helping Hands remains anonymous |   |

Please make cheques/money orders payable to Helping Hands and return this form with your gift to:

**Helping Hands, Where Community Concerns Matter**  
136 Shrewsbury Drive  
Brooklin, ON L1M 0E3

**WWW.HHcares.ca**  
**THANK YOU FOR YOUR SUPPORT!!!**  
**Charitable registration # 83584 4275 RR0001**