



Name: _____

Signature: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Email: _____

I wish to give:

___ \$25.00

___ \$50.00

___ \$75.00

___ \$100.00

Other: _____

Payment Information:

___ I enclose my cheque

___ please charge my VISA or MasterCard

Card Number: _____

Expiry Date: _____

Signature: _____

Comments:

**381 – 2nd Avenue, Campbell River, BC V9W 3V2
(250) 830-6958 phone & (250) 830-6959**