

## The Alpine Club of Canada Donation Form

I would like to make a financial donation to The Alpine Club of Canada.

Donation Amount:
\$

I would like my donation	directed to the			
	ranceted to the	e:		
☐ Greatest Needs	Fund	Facilities Fund	☐ Leadership Development	Fund
☐ Mountain Cultu	ire Fund	Environment Fund	☐ Other:	
Cheque enclosed	made payable	to The Alpine Club of C	anada.	
•		•	ne contact me to discuss.	
Name:	Membership#	I would like a tax receipt:	I prefer to donate by credit card:	
		Yes No	☐ MasterCard ☐ VISA	
Mailing / Street Address:			Credit Card #	
City:	Province:	E-mail Address:	Name as it appears on the card:	Expiry Date:
				/
Postal Code:	Home Phone:		Signature:	
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## Please complete the form and mail to:

Carine Salvy, Executive Director P.O. Box 8040, Canmore, AB T1W 1J8

If you are paying by credit card, you may also fax it to (403) 678-3224. Charitable Registration #106704182R0001

Thank you for your support of these worthwhile projects and funds.