

PLEASE PRINT THIS FORM AND MAIL YOUR DONATION TO THE SCHOOL. THANK YOU!

DONOR INFORMATION

| last name | first |
|---|-------------|
| street | city |
| | city |
| province | postal code |
| home phone | |
| e-mail | |
| GIFT INFORMATION | |
| gift amount: | |
| payment: | |
| □ cash | |
| □ cheque | |
| ■ charge credit card (not available at this time) | |
| designation of gift: | |
| IHM School general operation | |
| IHM School bursary fund | |
| IHM School capital improvements | |
| □ other (please specify) | |
| | |
| | |
| | |

If your company will match this gift, please include their matching form.

Please check here if you would like to have your gift remain anonymous:

Anonymous Donation

Please mail to:

Immaculate Heart of Mary School 650 Flora Avenue Winnipeg, Manitoba R2W 2S5