

Anaphylaxis Canada Donation Form

Simply fill out this form and mail or fax it to Anaphylaxis Canada.

Name _____

Address _____

Phone Home Work _____

Email _____

Donation

I wish to make a donation of: \$25 \$50 \$100 Other: _____.

Please notify the following person that this donation was made: *(Please print clearly name and complete address of the person.)*

Comments: *(“In memoriam”, “In honour of” a birthday, special event, etc.)*

Method of Payment

My cheque is enclosed. *(Payable to Anaphylaxis Canada.)*

I will pay by credit card: Visa / MasterCard / American Express *(Circle one)*

Card Number: _____ / _____ / _____ / _____ Expiry: ____ / ____

Card Holder's Signature _____

Information

I would like to receive an Anaphylaxis Canada information package.

Contact Information

Anaphylaxis Canada
2005 Sheppard Avenue East, Suite 800
Toronto, Ontario
M2J 5B4 CANADA

Tel: 866-785-5660 / 416-785-5666
Fax: 416-785-0458
Website: www.anaphylaxis.ca
Email: info@anaphylaxis.ca

Thank you for your support!

Anaphylaxis Canada is a registered charitable organization in Canada #887208676RR0001. Receipts are provided for donations over \$20.00 CDN.