



**YONGE
STREET
MISSION**

Thank you for supporting Yonge Street Mission!

Please mail or fax this completed form to:

306 Gerrard Street East

Toronto, ON M5A 2G7

P: 416-929-9614 F: 416-929-7204

E: donorservices@ysm.ca

Date: _____

Name: _____ Phone : _____

Address: _____ E Mail: _____

City: _____ Prov: _____ Postal Code: _____

(Receipt will be sent to the above address)

Donation Method (choose type of gift below)

Enclosed is my cheque in the amount of \$ _____ payable to Yonge Street Mission

Please charge my credit card the amount of \$ _____ Visa MasterCard AMEX

Card #: _____ Expiry: _____ Signature: _____

Type of Gift (please choose one)

General Donation, where ever the need is greatest

Designated Towards: _____

Gift in Memory of: _____

(Name of the deceased)

Send an acknowledgement card to:

Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

How would you like the card to be signed? _____

(name or names)

Gift in honour of: _____

(name of individual)

Send an acknowledgement card to:

Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

How would you like the card to be signed? _____

(name or names)



Thank you for your support!

Your contribution is tax-deductible, receipts will be mailed annually unless otherwise requested.

Charitable Registration No. 119306181RR0001

