

Our Lady of Perpetual Help Parish and School

Donation Form

Persona	l Informa	ation								
Prefix		☐ Mr.		☐ Mrs.		☐ Ms.			□ Dr.	
First Name		-			Last Name					
Street		-								
City							Province		Postal Code	
Email Ad										
Home Phone						Business				
Cell										
Donation Details										
I would like to make a donation to Our Lady of Perpetual Help Elementary School.										
Currency		\square CDN Funds \square US Funds			ınds					
One-time Gift		\$								
Monthly Gift		\$	\$		_ per month		Starting	/ MM YY	Ending/	
Annual Gift		\$	\$		per year		Number of years			
Cift Decimation										
Gift Designation Unrestricted										
ш	Unrestricted My gift is to be used to support the school's highest priorities, as determined by the Parish Education Committee.									
	Restricted My gift is to be used to support a specific purpose, project or program as indicated below.									
		Technology								
		Special E	ducation							
		Bursary F	Program							
		New Curriculum Initiatives								
Payment Options										
	Cheque (Payable to Our Lady of Perpetual Help Parish)									
	Credit C	ard Type:	☐ Visa		□ Maste					
	Card Number						_ Expiry Date	/		
	Card Number Expiry Date/ Name on Card							_		
Authorization										
Donor's Signature						Date				
We sincerely appreciate your contribution to Our Lady of Perpetual Help School.								School.		
For Offic	ce Use O	nly								
Received by:										
Reviewe		tor					Da	are		