

## **PARTICIPATION FORM**

PLEASE, type or print

Complete, print and return to the Franca Dora Foundation

IDENTIFICATION	
☐ Mr. ☐ Ms.	
First Name:	Last Name:
Street:	City:
Province:	Postal Code:
Telephone:	Cell Phone:
Email:	
ACCEPTED METHOD OF PAYMENT - CHEQUE	
I WANT TO CONTRIBUTE:	
<b>\$100</b>	
<b>\$500</b>	
\$1,000	
Friend of the Foundation \$5,000	
Major partner \$15,000	
Other:	
☐ I would like a receipt for tax purposes	
Please issue the receipt to:	
PLEASE MAKE YOUR CHEQUE OR MONEY ORDER TO THE ORDER OF: Franca Dora Foundation 4180, Place James Huston Montréal (Québec) H3R 3K3 Canada	
☐ I want to be informed of the various financing activities involving the participation of the Franca Dora Foundation	