

Craig's Cause Pancreatic Cancer Society General Donation Form



Yes, I would like to make a donation to Craig's Cause Pancreatic Cancer Society in support of research, education, awareness and patient support.

Title: _____ Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Phone: _____ Email: _____

My gift is in memory

Name of Person: _____

Please send notification of my gift to:

Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Relation to deceased: _____

We will send an acknowledgement of your donation to the person above. Dollar amounts will not be referenced.

\$500 \$250 \$100 \$50 \$25 Other Amount _____

Payment Options: (please do not mail cash)

I have enclosed a cheque payable to: Craig's Cause Pancreatic Cancer Society

Credit Card: VISA MC AMEX

Name _____

Card# _____ Expiry (mm/yy) _____

Signature _____ 3 or 4 digit sec code _____

For credit card donations – use your credit card mailing address

Address _____ City _____

Postal Code _____ Country _____

100% of your donation supports pancreatic cancer awareness, education, support and research.

Thank you for your donation!

**Please mail this form to:
Craig's Cause Pancreatic Cancer Society
P.O.Box 8561,
Halifax, N.S., B3K 5M3**