



Donation Form

I would like to make a donation in the amount of \$ _____ to Safe Haven Foundation. Please direct my donation to:

- Area of Greatest Need
- Endowment Fund
- I would like to specifically support one of the five programs you fund:

My donation will be made via:

- Cheque (please make payable to Safe Haven Foundation)
- Visa MasterCard AMEX

Card# _____

Expiry Date (mm/yy) _____

Name as it appears on the Card: _____

- Please send me information on monthly giving
- Please send my tax receipt at the end of the year
- I would like to receive information on other donation options

Personal Information

Name: _____

Mailing Address: _____

Main Phone Number: _____

Other Phone Number: _____

Email: _____

- I would like to remain anonymous

By signing and dating below, I confirm that the above information is correct and if applicable, hereby authorize Safe Haven Foundation to charge my credit card as specified above.

Signature: _____ Date: _____

Please return donation pledge form to Jody Horvath, Marketing Coordinator & Executive Assistant, 609 – 7620 Elbow Drive SW, Calgary AB T2V 1K2 phone: 403.230.2613 fax: 403.230.9453 email: Jody@safehavenfoundation.ca