



www.fifehouse.org

YES..... I WANT TO SUPPORT FIFE HOUSE!

I want to help Fife House provide secure and affordable **supportive housing** and **support services** for people living with HIV/AIDS!

Name: _____

Address: _____

City, Province: _____ Postal code: _____

Telephone Number(s): _____

E-mail Address: _____

I would like to make a one-time donation to Fife House in the amount of \$ _____

____ Enclosed please find my cheque or money order made payable to Fife House

____ I hereby authorize Fife House to charge the one time amount indicated above to my:

VISA or MasterCard credit card # _____ Expiry Date: _____

Signature: _____ Date: _____

I would like to join the Fife House Builder monthly donation program. I pledge \$ _____ /month.

____ I have included my cheque marked VOID

____ I hereby authorize Fife House to charge my credit card on the 15th business day of the month:

VISA or MasterCard credit card # _____ Expiry Date: _____

Signature: _____ Date: _____

Fife House will automatically issue official receipts for income tax purposes for gifts of \$20 or more.
Fife House's charitable registration number is: 13040 1573 RR0001.

Please mail this completed form to:
Fife House Foundation, 490 Sherbourne Street, 2nd Floor Toronto ON M4x 1K9

Or fax to (416) 205-9919

THANK YOU!!

Fife House respects your privacy. Fife House does not rent, sell, buy or trade its mailing lists. The information you provide will only be used to issue your tax receipt and keep you informed of events, fundraising and volunteer opportunities in support of Fife House. If at any time you wish to be removed from our mailing list simply email info@fifehouse.org or call (416) 205-9888 ext. 241.