



## Sistering Tribute Gift Form

**Yes, I want to help Sistering provide food, shelter and a caring community for women who have no where else to go.**

I would like to make a **special** contribution of:

- \$50
- \$100
- \$250
- \$500
- Other Amount\_\_\_\_\_

**In Honour of:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province \_\_\_\_\_ Postal code \_\_\_\_\_

Message: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Your Information**

Title \_\_\_\_\_ Ms. \_\_\_\_\_ Mrs. \_\_\_\_\_ Mr. \_\_\_\_\_ Dr.

First name \_\_\_\_\_

Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_  
Province \_\_\_\_\_  
Postal Code \_\_\_\_\_  
Country \_\_\_\_\_  
  
Phone (home) (\_\_\_\_\_)\_\_\_\_\_  
Phone (work) (\_\_\_\_\_)\_\_\_\_\_  
Email \_\_\_\_\_

We keep all email addresses confidential. Contact us at 416-926-9762 ext. 243 for more details on our privacy policy.

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Would you like to receive our quarterly Sistering newsletter

- Yes
  - No
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#### Payment Options

Credit Card \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Amex \_\_\_\_\_  
Name on Card \_\_\_\_\_  
Card Number \_\_\_\_\_  
Expiry Month/Year \_\_\_\_\_/\_\_\_\_\_

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You can print and send this form by mail or fax to:

Development  
Sistering  
962 Bloor Street West  
Toronto, ON  
M6H 1L6  
Fax: (416) 926-1932

You may also donate by phone by calling  
(416) 926-9762 ext.243