



Project Ploughshares Memorial Gift Donation Form

Use this form to make a donation to Project Ploughshares in memory of a departed family member, friend, or colleague. A tax receipt will be issued to you and a memorial card will be sent to the person you designate.

STEP 1: YOUR INFORMATION

First Name _____ Last Name _____

Address _____ Apt/Unit _____

City _____ Province _____ Postal-code _____

Home phone# ____-____-____ Work phone# ____-____-____ ext. ____

Email _____ (optional)

Telephone and email information is kept confidential and is only requested in case we need to get in touch with you regarding your donation.

STEP 2: PAYMENT DETAILS

I want to make a donation of: \$_____ in memory of _____

by cheque: enclosed (made payable to Project Ploughshares)

by credit card:

Card type  

Card # _____ Expiry Date mm____/yy____

Card holder _____ Signature _____

STEP 3: DESIGNATED RECIPIENT INFORMATION (CONFIDENTIAL)

First Name _____ Last Name _____

Address _____ Apt/Unit _____

City _____ Province _____ Postal-code _____

In the card, please identify me as follows: _____

Mail or fax this form to:

**Project Ploughshares
140 Westmount Road North
Waterloo ON N2L 3G6
Fax: 1-519-888-0018**