



Langley Hospice Society

langleyhospice.com

Providing compassionate care and support since 1983

DONATION FORM

Langley Hospice Society is committed to protecting the privacy of its donors, members, volunteers, employees and other stakeholders. Your personal information is never shared with other organizations.

Please print this form, complete and return it to us.

Your Name _____

Address _____

City _____

Postal Code _____

Day Phone _____ Evening Phone _____

Mobile _____ Fax _____

E-Mail _____

Amount of Gift: \$ _____

Enclosed is my cheque or money order made payable to **Langley Hospice Society**.

I prefer to make my gift by credit card (Visa or Mastercard only).

Name as it appears on Visa/Mastercard _____

Card Number _____ Expiry Date (mm/yy) _____

Signature _____ CSV: _____
(3-digit no. from back of card)

I would like to make my gift: In Memory Of In Honour Of

Please send a notification card to let the family/person know of my memorial/honorarium gift to (amount of gift will not be disclosed):

Name _____

Address _____

Relationship to the deceased/honoree _____

- I would like information about:
- Langley Hospice programs and services
 - Volunteering with Langley Hospice Society
 - Donating by automatic withdrawal
 - Leaving a gift in my will/planned giving
 - I have left a gift in my will to Langley Hospice Society
 - I would like to become a member of the Society (\$10.00 annually)

You will receive an official tax receipt for donations over \$10.00.

Please send the completed form with your cheque or credit card information to:

Langley Hospice Society
20660 – 48 Avenue, Langley, BC V3A 3L6
Tel (604) 530-1115 Fax (604) 530-8851
Email: info@langleyhospice.com

Registered Charity No. 11900 5353 RR0001