

Donation Form

I am pleased to support The Royal with a gift of:

☐ \$25 ☐ \$50 ☐ \$100 Other amount: _____

Donor Information

Is this gift on behalf of an organization? ☐ Yes ☐ No

If yes, Organization name: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Preferred Email: _____ ☐ Personal ☐ Business

Preferred Phone #: _____ ☐ Home ☐ Business ☐ Mobile

Language preference: ☐ EN ☐ FR

Recognition

Please check all that apply:

☐ This gift is in memory / honour / celebration of: _____

Name & address of bereaved family/person being honoured:

First Name: _____ Last Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

☐ The Royal Ottawa Foundation for Mental Health may recognize my donation publicly in the following manner:

Recognition name: _____

☐ I prefer that my donation remain anonymous (recognized publicly as an "anonymous" donation)

Payment Options

☐ **Cheque** made payable to Royal Ottawa Foundation for Mental Health. ☐ **Cash**

☐ **Wire Transfer or Electronic Funds Transfer (EFT)** to Royal Ottawa Foundation for Mental Health.

TD BANK (240-45 O'Connor Street, Ottawa, ON K1P 1A4) Institution#: **004** Transit#: **03546** Account#: **5282120**

☐ **Credit Card** For your security and to comply with PCI regulations, we do not accept credit card information on this form or by email. A member of the Foundation staff will contact you directly by phone to collect this information securely.

The Royal Ottawa Foundation for Mental Health is a registered charity under the Income Tax Act (Canada). The donor will receive an official receipt for income tax purposes upon receipt of the gift. (Charitable registration # 11912 9179 RR0001)

With your support, we can help more people reclaim their lives from mental illness and addiction.

DATE: _____

SIGNATURE: _____

Contact Us



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