Canadian Cancer Society

Trucking for a Cure

☐ Woodstock

☐ Prescott

PARTICIPANT INFORMATION

First Name:	Last Name:	
Address:	City:	Province:
Postal Code: Phone #: ( )	Email:	

DONOR INFORMATION

Donor's name and address must be legible and complete
Please make cheques payable to: CANADIAN CANCER SOCIETY
Receipts are issued for donations of $20.00 or more; upon request for all other amounts

FULL NAME	ADDRESS	CITY, PROV	TEL #	POSTAL CODE	$	RECEIPT?
Sample entry: *Jane Doe*	*123 Easy Street*	*Anytown, ON*	*(705) 123-1234*	*A1B 2C3*	*$75*	*yes*
Card#: *1234 5678 9123 4567*	Name on card: *Jane Doe*	Expiry: *01/15*	Security Code: *123*	Signature: *Jane Doe*		
Card#:	Name on card:	Expiry:	Security Code:	Signature:		
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DONATION TOTAL (this page): **GRAND TOTAL:**

***The Canadian Cancer Society respects your privacy. It has always been our policy never to sell, trade or lend the information you give us. Information you provide will be used to process donations or registrations and keep you informed about our activities including events and opportunities to volunteer or to give. We offer numerous privacy options. If you wish to limit or opt-out of future contact, please contact us at Toll-Free: 1-888-939-3333 Phone Number: 416-961-7223 or by email at privacy.officer@cancer.ca.**

Thank you for your Support!

Canadian Cancer Society, 300-55 St. Clair Avenue West, Toronto, ON, M4V 2Y7
www.cancer.ca
Phone # 416-961-7223 / 1-888-939-3333 Fax # 416-961-4189
Charitable Registration # 118829803 RR 0001