



Yes, I would like to make a donation to the Sunnyside Foundation!

- \$25 \$100
- \$50 Other \$ _____

Method of Payment:

- Cheque (Please make cheque payable to Sunnyside Foundation)
- VISA MasterCard

Credit card #: _____

Expiry Date: _____

Contact Information:

Name: _____

Address: _____

Telephone #: _____

Donation for:

- In Memory of: _____
- General Donation
- Community Alzheimer Programs
- Chaplaincy Program
- Other

Please mail this form to:

Sunnyside Foundation
247 Franklin Street North
Kitchener ON N2A 1Y5
Phone: 519-893-8494 extension 6377
Fax: 519-893-4450

Thank You

Your Donation will make a difference in the lives of the residents and community served by Sunnyside Seniors' Services

Receipts for income tax purposes will be issued for all donations over \$10
Registered Charitable # 87728 8167 RR001