



500 Victoria Road North, Guelph, Ontario N1E 6K2  
Charitable Registration Number 89445 0444 RR0001

**CONTRIBUTION FORM (PLEASE PRINT CLEARLY)**

**Directions for Donor:**

Please complete the top portion of this form and submit along with your donation.  
Please give the bottom portion of this form to the student connected to your donation.

I would like to make the following gift:  
 \$20     \$50     \$100    Other: \$ \_\_\_\_\_ (Tax receipts will be issued for contributions of \$20 or more)

**A. Donor Information**

Name (as it will appear on your tax receipt, if applicable):  
\_\_\_\_\_

Address (full mailing address, including postal code):  
\_\_\_\_\_

**B. Please use my gift towards:**

Assisting the following school: Ecole Guelph Lake

I'd like my donation to the above school to go towards:  
A particular program, fundraiser or event: school-based learning enhancement

**C. Payment Method:**

Donations may be made on-line through Canada Helps –  
<https://www.canadahelps.org/en/charities/upper-grand-learning-foundation/>

I have enclosed a cheque made payable to the Upper Grand Learning Foundation in the amount of: \$ \_\_\_\_\_

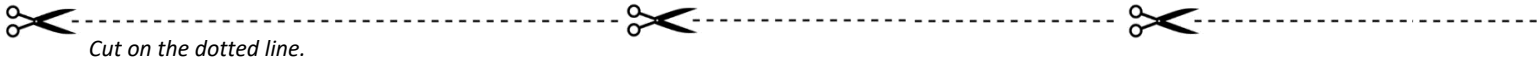
Please charge my [VISA] or [MASTERCARD] for \$ \_\_\_\_\_ (there is a 3.5% fee charged by banks for credit card donations)

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

D) Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For recognition purposes, I wish to remain anonymous     No tax receipt required

The above information is used to direct funds as indicated above and to produce a Tax Receipt. The information will be kept secure and in accordance with Legislation and the Board's Records Management Policy and Guidelines. For more information please see our Privacy Policy at [www.uppergrandlearningfoundation.com](http://www.uppergrandlearningfoundation.com) or call (519) 822-4420 ext. 827  
Revised: Mav2020



Cut on the dotted line.

**Donor:** Fill-in the donation amount and give slip back to the student connected to the donation.

**Student:** Please submit this completed form to your teacher by February 13<sup>th</sup>.

<b>Student's Name:</b>	_____
<b>Donation Amount:</b>	_____

*(The class who raises the most money will win a prize!)*

Thank you for your support!