



**Help us create a healthy community by joining us in growing a new community centre!**

**I would like to make a gift to the Capital Campaign totalling: \$\_\_\_\_\_**

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**Name**

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**Address**

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**City**

**Province**

**Postal Code**

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**Phone**

**Email**

\_\_\_\_ I would like to discuss name rooming opportunities with a representative from the organization, please contact me at the number listed above.

**Method of Payment:**

- Cheque (made payable to Langs Farm Village Association)
- Visa

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Card Number

Expiry Date

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Cardholder Name

Signature

Date

**Preferred Payment Schedule**

	<b>Amount</b>	<b>Month</b>	<b>Year</b>
<b>Year 1</b>	_____	_____	_____
<b>Year 2</b>	_____	_____	_____
<b>Year 3</b>	_____	_____	_____

**Please mail to:**

Growing It Forward Capital Campaign  
Langs Farm Village Association  
1145 Concession Road  
Cambridge, ON N3H 4L5

**THANK YOU FOR YOUR ONGOING SUPPORT OF LANGS FARM VILLAGE ASSOCIATION!**