

## LANGS GENERAL DONATION FORM

Name	
Address	
City, Province	
Postal Code	
Email Address	
Phone Number	

### Donation Amount and Payment Type

I would like to make a gift to Langs in the amount of \$ \_\_\_\_\_

Please circle one payment type:                      Cash                      Cheque                      Credit Card

Credit Card Number	
Expiry	
CVV	
Signature	
Date	

### Type of Donation (Select One)

<input type="checkbox"/>	Anonymous Donation	I do not wish to have my name listed in any donor recognition materials
<input type="checkbox"/>	Recognized Donation	I wish to have my name listed in donor recognition materials as follows: _____

### Optional: Donate in honour or memory of someone

<b>Donate:</b>  <input type="checkbox"/> In honour of <input type="checkbox"/> In memory of	Name of person donation is in honour or memory of: _____  <b>Yes! Please send a card to acknowledge my donation to the following name and address:</b>
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### Donation Allocation

<input type="checkbox"/>	<b>1. Please apply my donation where it is needed most.</b>
<input type="checkbox"/>	<b>2. Please apply my donation to a specific program.</b> <i>List program here:</i> _____
<input type="checkbox"/>	<b>3. Please apply my donation to a specific location.</b> <i>List location here:</i> _____

You can also donate online at: [langs.org/get-involved/donate](http://langs.org/get-involved/donate)

**Please return this form with payment to:**

Langs, 1145 Concession Road, Cambridge, ON N3H 4L5

**THANK YOU FOR YOUR DONATION!**