



DONATION FORM

Date _____ Na'amat Chapter (if applicable) _____

Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Home Phone: (____) _____ Business Phone: (____) _____

Cellular Phone: (____) _____ Fax: (____) _____

Email Address: _____

Date of Birth: (month, day, year) ____/____/____

Donation Amount:

\$36.00 \$54.00 \$72.00 \$118.00 \$250.00 Other _____

Method of Payment: Cheque VISA MasterCard

Card Number: _____ Expiry Date: ____/____/____

Type of Card/Certificate: _____

To: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Occasion: In Memory of _____

In Honour of _____

Card/Certificate Inscription:

Privacy Policy:

Na'amat Canada respects your privacy and maintains high standards to protect the confidentiality of the personal information of our members and donors. The information that you provide will be used for purpose of keeping you informed of our objectives, services and programs as well as for processing any donation you make to support Na'amat. If at any time you wish to be removed from this list or from any future Na'amat mailings, simply contact us by phone at 1.888.278.0792 or via email at naamat@total.net. If you would like more information concerning Na'amat's commitment to safeguard your privacy, please contact our Privacy Officer at 1.888.278.0792.

A tax receipt for donations of \$10.00 or more will be mailed. Na'amat Canada receipts annually in December.