Donation Form



300-3820 Cessna Drive, Richmond, BC Canada V7B 0A2

Toll Free 1.800.213.2131 press 3

Email donations@rickhansen.com

www.rickhansen.com

Your Personal or Organization Information

Prefix/Title	First Name	Middle Intial	Last Name			
Organization Name (if corporate gift) Receipt will be issued in the organization's name						
Mailing Address	City	Province	Postal Code			
Email		Phone				
Yes! I would like of my gifts.	e to receive e-news u	pdates from the Rick Hanser	n Foundation on the impact			
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My Gift is a Tribute Gift

☐ In honour of	☐ In memory of	First Name	Last Name	
I would like the fo	ollowing person to be notified	d of my gift:		
Name	Mailing Address	City	Province	Postal Code

To Mail This Form:

Charitable Registration # 10765 9427 RR0001

Rick Hansen Foundation Attn: Donor Services 300-3820 Cessna Drive Richmond, BC CANADA V7B 0A2

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