

IN MEMORIAM DONATION FORM

The Friends of Pinery Park



I would like to make a donation in memory of: _____

With a gift of: \$_____

Please inform the next kin that a donation has been made.

I would like to keep my gift private.

Next of Kin:

Name _____

Address _____

Phone _____

My Address:

Name _____

Address _____

Phone _____

I am currently a member of the Friends of Pinery Park: Yes No

My membership number is: _____

Type of Donation:

One time

Annual

Monthly

Method of Payment:

Cheque (please make payable to: The Friends of Pinery Park)

Visa

Mastercard

American Express

Card Number _____ Expiration Date _____

Signature required for credit card _____

Send To: The Friends of Pinery Park

P.O. Box 40

R.R. 2

Grand Bend, ON

N0M 1T0

Or Call Us At: (519) 243-1521