



OFFICIAL DONATION FORM

“Sending children with Sickle Cell Anemia to summer camp and supporting their education”

Company Name: _____

Contact Name: _____

Title: _____

Address: _____

City, Province: _____ Postal Code: _____

Telephone: (____) _____ Fax: (____) _____

Email: _____ Monetary Donation (list amount): _____

Gift-in-kind Donation (list item(s): _____

Item(s) value: _____

Detailed Description of gift-in-kind Item(s) (expiry dates, limitations, # of persons, black out periods, etc.):

Please check one of the following boxes and return the form:

- I will mail my donation or deliver my gift directly to Camp Jumoke
- Please phone or email me to arrange to pick up my donation/gift
- Sorry, not this year, but keep me on your mailing list or future requests
- Other _____

Fax, email or mail your completed form using the contact information below. Please do not send cash in the mail.

Thank you for your generous support!