



# CASUAL FOR A CAUSE

## REGISTRATION FORM

Please photocopy and provide one form to each person purchasing a button for a minimum of **\$20**. Return completed forms to the Foundation Office with 2012 Casual for a Cause summary and payment.

### Contact Information:

Dr./Mr./Mrs./Ms. \_\_\_\_\_  
(please circle) First name Last Name

Address: \_\_\_\_\_

City / Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Company Name where pin was purchased: \_\_\_\_\_



Note: please ensure that the information is complete for **tax receipt** purposes. Tax receipts will be issued upon receipt of funds. ***Or please attach a list of names & mailing information to this order form if more than one individual is purchasing a button.*** For more information contact the VJH Foundation Office at 250-558-1362; you can fax your order to 250-558-4133 or email Andrea Egan at [andrea.egan@interiorhealth.ca](mailto:andrea.egan@interiorhealth.ca)

Privacy statement - VJH Foundation does not sell, rent or trade its donor list. We collect your personal information to process donations, issue tax receipts, keep you informed about our activities and ask for your support.

Please issue me \_\_\_\_\_ Casual for a Cause Buttons for \$\_\_\_\_\_ each. My donation is \$\_\_\_\_\_

### Method of payment:

VISA       Master Card       cheque\*       Cash

credit card number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Name as it appears on the Credit Card \_\_\_\_\_

Signature: \_\_\_\_\_

\* if paying by cheque please make cheque payable to **Vernon Jubilee Hospital Foundation**

*Thank you for your support!*