



ABOUT ME

Date: _____

Name: _____

Address: _____

City: _____

Province: _____ Postal Code: _____

Phone: _____

Email: _____

DONATION OPTIONS - choose ONE of the following

One-time Gift:

- \$29.70 to feed 10 people \$59.40 to feed 20 people
- \$148.50 to feed 50 people \$297.00 to feed 100 people
- \$ _____ to feed as many people as possible

Payment Method:

Cheque: Please make cheques payable to Siloam Mission

Credit Card: Visa MasterCard Amex

Number: _____

Expiry date: _____ / _____

Signature: _____

Monthly Partner – please withdraw each month from my account:

- \$29.70 to feed 10 people \$59.40 to feed 20 people
- \$148.50 to feed 50 people \$297.00 to feed 100 people
- \$ _____ to feed as many people as possible

Withdrawal Method:

From a bank account: please include a void cheque

From a credit card: Visa MasterCard Amex

Number: _____

Expiry date: _____ / _____

To authorize this automatic withdrawal (for either payment method)

Please sign here: _____

Please return this form to:
Siloam Mission
300 Princess Street
Winnipeg, MB R3B 1M3