

# I'M PROUD TO BECOME A LINK OF THE CHAIN OF SOLIDARITY OF CYCLO NORD-SUD



**I wish to donate :**

\$500  \$200  \$100  \$70  \$50  \$30  autre \_\_\_\_\_ \$

*Payment method :*

Chèque  VISA  MasterCard

Card Number : \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Signature : \_\_\_\_\_

**I want to join the Monthly Giving Program\***

I authorise Cyclo Nord-Sud to deduct the following amount:

\$ \_\_\_\_\_ per month (minimum : \$ 5) the  1<sup>st</sup> or  15<sup>th</sup> day of the month

- From my checking account (Please join a cheque marked «Void»)  
 By billing my credit card (Please complete the section "payment method" to the left and sign)

*\* Monthly donations reduce our administrative fees. You can end or modify your participation in the monthly giving program at any time by contacting us at 514 843-0077 or info@cyclonordsud.org.*

For contributions of \$30 or more, a tax receipt and a membership card will be issued

Société d'éducation pour le cyclisme. Charity registration number : 130964786RR0001

**First and last Name**

**Address**

**City**

**Postal Code**

**Phone number**

**Email**

*You will receive your tax receipt by email if you provide it.*

*Check the box if you would rather receive a paper copy*

**I'm referred by:**

**First and last name**

**Phone number and/or email**

**Make cheque payable to :**

Cyclo Nord-Sud - 8717, 8<sup>e</sup> Avenue - Montréal (Qc) H1Z 2X4