



I would like to support programs at James Bay Community Project

Enclosed is my cheque payable to James Bay Community Project

Yes I would like a charitable tax receipt
Please send it to:

25 50 100 250 500 other _____

Name _____

I prefer to give on my VISA MasterCard

Address _____

Name on Card _____

Postal Code _____

Card Number _____

Phone _____

Expiry _____ Signature _____

Email _____

I wish to become a monthly donor please charge 12 monthly payments of \$_____ to my credit card

OR

I wish to become a monthly donor please find enclosed 12 postdated cheques

I wish my donation to be anonymous

I would like to find out more about leaving JBCP in my will

Yes I'd like to receive the JBCP Newsletter by Mail___ Email___ No thank you do not send me any mail

**Please mail your donation with this form to James Bay Community Project,
547 Michigan St. Victoria BC V8V 1S5 or drop it off at reception.**

James Bay Community Project respects your privacy and adheres to the legislated privacy requirements. We do not and nor will we ever sell, trade or rent out any of your personal information. For further information or if you have any questions please contact: Paula Greene: pgreene@jbcpc.bc.ca/250.388.7844. ext. 309