



In Memoriam Donation

I would like to make a donation in memory of: _____

The James Bay Community Project would like to send an memoriam card to the family letting them know we have received donations in memory of their loved one. If you choose to please provide their contact info below:

Family's Name: _____

Address: _____

Postal Code: _____

Enclosed is my cheque payable to James Bay Community Project or JBCP for:

\$25 \$50 \$75 \$100 \$150 \$200 \$250 \$500 Other

OR I prefer to give on my VISA MasterCard

Card Number: _____

Expiry Date: _____

Donation Amount: _____

Signature: _____

I wish to be listed as Anonymous on the Donor Board and on the In Memoriam Card

I would like to find out more about including JBCP in my will and estate planning.

A charitable tax receipt for your donation will be sent to you at:

Your Name: _____

Address: _____

Phone: _____ Postal Code: _____

Email: _____

Please mail your donation with this form in the enclosed envelope or drop it off at:

James Bay Community Project
547 Michigan Street Victoria, BC V8V 1S5 · Tel. (250) 388-7844 · Fax (250) 388-7856