



SPONSOR FORM

YES! I would like to make a donation to **The Leukemia & Lymphoma Society of Canada** to support Light The Night and the efforts of _____.
(Name of Participant you are supporting)

\$500 \$400 \$300 \$200 \$100 \$50 \$25 Other: \$ _____

Corporate donation **Personal donation**
 My employer will match this contribution. Completed company form is attached

Cash **Cheque/credit card (see below)**
Note: Please do not send cash in the mail

Receipt required? (\$10 Minimum)

Date of donation: _____

Name: _____ Company: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: Home () _____ Work: () _____ X _____

Cheque enclosed (please make payable to **The Leukemia & Lymphoma Society of Canada**) and write (athlete's name) on the "memo" or "re" line of cheque.

Credit Card Donation:

VISA MasterCard American Express

_____ Expiration Date ____/____/____

Name on Card: _____ Signature: _____

Thank you for your kind and generous support!

Please mail or fax this to the following:

THE LEUKEMIA & LYMPHOMA SOCIETY OF CANADA
Suite 208, 10240 124 Street
Edmonton, AB T5N 3W6
(TEL) 780-758-4261 (FAX) 780-454-4171