



# Donation Form

Please print, complete and mail this form to:  
Lincoln Pelham Public Library  
5020 Serena Drive  
Beamsville, ON L0R 1B0  
Lincoln Charitable Registration #: 107626590RR0001  
Pelham Charitable Registration #: 130638018RR0001

## Donor Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Tribute Information (If making a tribute gift, please complete this section)

In Memory of: \_\_\_\_\_  
In Honour of: \_\_\_\_\_ Honour Reason: \_\_\_\_\_  
Please send Acknowledgement to: \_\_\_\_\_  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## I would like to make a One Time Gift of:

- \$20     \$30     \$50     \$100     Other: \$ \_\_\_\_\_  
 Cheque enclosed payable to the Lincoln Pelham Public Library

*For customer protection and privacy this information will be destroyed after credit card processing.*

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**Payment Information**    Credit Card Type:     Visa     MasterCard  
Card Holder Name: \_\_\_\_\_ Credit Card Number: \_\_\_\_\_  
Expiry Date: \_\_\_\_\_ CVN Number: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***On behalf of the Lincoln Pelham Public Library, thank you!***

The collection of information on this form is subject to the provisions of the Municipal Freedom of Information and Protection of Privacy Act. The information collected on this form will only be used for library related business, tax receipting purposes and to keep you updated on library activities. If you no longer wish to receive information from us please contact us at 905-563-7014.