



Donor Pledge Form

(Please Print)

Company _____

Contact name _____

Address _____

City _____ Prov. _____ Postal Code _____

Email _____ Phone _____ Fax _____

- A. Sponsorship Level Amount
- Platinum \$ 10,000
 - Gold \$ 5,000
 - Silver \$ 2,500
 - Bronze \$ 1,500

B. Sponsor of a theme tree \$ 1,000

- C. Cash Donation
- Cheque/money order payable to
Treasures of Christmas
 - Visa Mastercard Expiry ___/___
 - Card # _____
 - Signature _____
 - Charitable Tax# 8948550635 RR0001
 - Society #24391

- D. Donation of merchandise or professional services
- Description of item: _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Market Value \$ _____

All donations must be confirmed by October 29, 2010 in order to be acknowledged in event program.
We ask that all donations are received by November 12, 2010.

Tax receipts will be issued for cash donations only.

Please forward to Treasurers of Christmas
P.O. Box 1072
Coquitlam, BC V3J 6Z4
Phone: 604-945-0606 Fax: 604-945-9071
Website: www.treasuresofchristmas.ca

Treasures of Christmas Representative

Please print name

The use of your personal information will be used exclusively for Treasures of Christmas purposes and will not be shared or sold to any other party.

For office use only:	
Date received _____	Auction/Treasurer _____
Database _____	Program _____