



Rotary Club of Haliburton Donor Form

Name: _____

Address: _____

Phone: _____

E-mail: _____

- | | | | |
|-----------|--------------------------|------------|---|
| Donation: | <input type="checkbox"/> | \$2,500.00 | Eligible for tax receipt and Diamond Donor Recognition |
| | <input type="checkbox"/> | \$1,000.00 | Eligible for tax receipt and Platinum Donor Recognition |
| | <input type="checkbox"/> | \$500.00 | Eligible for tax receipt and Gold Donor Recognition |
| | <input type="checkbox"/> | \$100.00 | Eligible for tax receipt |
| | <input type="checkbox"/> | _____ | Other |

- Yes, I would like a tax receipt for my donation.
- I permit the Rotary Club of Haliburton to acknowledge my donation on Social Media.
- With my donation of \$500 or over I would like to be recognized on the donor plaque.

Indicate how you would like your name/organization to appear on the donor plaque.

- I would like to make my donation anonymously.

Please make Cheques Payable to **Rotary Club of Haliburton**

Mail to: P.O. Box 832 Haliburton, ON K0M1S0 (or drop of at Century 21 Office)

E-Transfer donations to **haliburtonrotary@gmail.com**

Thank you for supporting the Rotary Club of Haliburton