

GENERATIONS OF HOPE



FERTILITY ASSISTANCE FUND

**YES! I/we want to support the Generations of Hope
Fertility Assistance Fund with a gift of:**

\$100 \$75 \$50 \$25

Other: \$ _____

I would like to be referred to as:

Mrs. Ms. Mr. Other: _____

Name: _____

Company

Name: _____
if making a corporate donation

Address: _____

City: _____ Prov: _____ Postal Code: _____

Tel: (_____) _____

Email: _____

May we keep in touch with you via e-mail? YES NO

PAYMENT

I am enclosing a cheque payable to *Generations of Hope Fund*

Charge to my: VISA MasterCard

Cardholder Name: _____

Card No.: _____ Expiry: _____
MM YY

Cardholder Signature: _____ Date: _____

Registered Charity # 810472274 RR0001. Tax receipts will only be automatically issued for donations of \$25 or more unless otherwise requested.

Important Information for Our Supporters: The Generations of Hope Fertility Assistance Fund respects your privacy and confidentiality. We do not sell, trade or in any way share any information you provide us. The information you provide will be used for the purpose of managing our programs and distributing related information. If at any time, you wish to be removed from any of these contacts, please let us know by writing to us at Suite 330, 1620 - 29 Street NW Calgary AB T2N 4L7 or send an email to info@generationsofhope.ca

Thank you for your support!

GIFT FORM

**Help put the hope of
having a child within
everyone's reach.**

COMPLETE AND MAIL FORM TO:

Generations of Hope Fund

Suite 330, 1620 - 29 Street NW
Calgary, Alberta T2N 4L7

OR FAX COMPLETED FORM TO:

403-284-9293

To make a donation via telephone,
please call the Regional Fertility
Program offices at:

403-284-9103