



Halton Women's Place

Healthy Relationships • Healthy Communities

2025 Guelph Line, Suite 223, Burlington, ON L7P 4X4

**Yes, I would like to invest
in the safety of women
and children of Halton!**

You can donate *online* at
www.haltonwomensplace.com

An official e-tax receipt will be emailed directly to you.

Enclosed please find my donation for:

- \$25
 \$50
 \$75
 \$100
 \$200
 Other \$ _____

Payment: (check one)
 Cheque / Money Order
 American Express
 MasterCard
 VISA

Card No. _____ Ex. _____

Signature _____

Phone No. _____

Kindly mail my tax receipt to:

Name _____

Company _____

Address _____

Email _____

 *Thank You*

Registered Charitable No. 10746 2558 RR0001

We do not solicit door-to-door nor sell/trade our mailing list.

Pre-Authorized Payment Authorization Form

To <i>Halton Women's Place</i>		
Name(s)		
Address		
City	Province	Postal Code
Telephone No.		
Name of Financial Institution		
Branch Address		
City	Province	
Bank Number		Transit Number
Account Number		
<p>Please attach a VOID cheque.</p> <p>I / we (the above named) authorize Halton Women's Place to debit my / our account indicated above, in the amount of \$ _____ on the ____ day of each month, for _____ months, for payments to Halton Women's Place in respect of:</p> <p>_____</p> <p>Each payment shall be the same as if I / we had personally issued a cheque authorizing the Bank to pay Halton Women's Place as indicated and to debit the amount specified to my / our accounts.</p> <p>I / we will notify Halton Women's Place promptly in writing if I / we move the account from one bank or branch to another, or if there is any other change in the account.</p> <p>I / we understand that the Bank is not responsible to verify whether these payments are properly debited to my / our account.</p> <p>This authorization may be cancelled at any time upon written notice by me / us to Halton Women's Place.</p> <p>Any delivery of this authorization to Halton Women's Place constitutes delivery by me / us to the Bank.</p> <p>I / we am / are all the persons who are required to sign on the above account.</p>		
Date		Signature