August 3rd & 4th, 2018

Cape Breton Regional Hospital - Cancer Patient Care Fund

Event Name: 15th Annual "Ride 4 the Cure"

Name:_____

Address:_____

Email: _____

Daytime #:_____ Evening #_____

REGIONAL HOSPITAL FOUNDATION

PLEASE PRINT CLEARLY

Donor Name	Mailing Address	City	Province	Postal Code	$ Pledged	$ Collected	Receipt Req'd?
					Total		

Please make cheques payable to the Cape Breton Regional Hospital Foundation.
Donor's name & address must be complete and legible. Tax receipts will be issued for donations of $20 or more & will be mailed directly to donors.

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Cape Breton's Cabot Trail RIDE 4 the CURE

Thank you for your Support!

Charitable registration #13040 4593 RR0001