

Cape Breton Regional Hospital - Cancer Patient Care Fund

Event Name: Sydney Lions Club's Ride 4 the Cure

August 2nd & 3rd, 2019

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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Thank you for your Support!

Charitable registration #13040 4593 RR0001

