

1 One-time Gifts

You can donate online at donate.wycliffe.ca, or use this form to send a one-time gift by cheque or credit card.

Name _____

Address (for receipting purposes) _____

(City, Prov., Postal Code) _____

Phone _____

Email _____

Donor # (office use) _____

Amount Wycliffe member/project name For office use only

	Nora Hajian; 53993	

Credit card information (if applicable):

VISA Mastercard

Name on card: _____

Card Number: _____
- - - - -

Expiry date: (mm/yy) ____ - ____

Signature _____

Check here if you wish to receive a receipt for this gift at year-end. Please note that receipts are issued only for gifts of \$25 or more.

If giving by cheque, mail your cheque with this completed form to:

Wycliffe Bible Translators of Canada
4316-10 St. NE Calgary, AB T2E 6K3

Attention: Receipts

If giving by credit card, you may fax the completed form to:

403-250-2623 **Attention:** Receipts

or ...

Scan and email to:

receipts@wycliffe.ca

2 Monthly Credit Card Giving

Name _____

Address (for receipting purposes) _____

(City, Prov., Postal Code) _____

Phone _____

Email _____

Donor # (office use) _____

I hereby authorize Wycliffe Bible Translators of Canada Inc., to draw from my credit card, on the **10th** of each month, in the amount of \$_____.

Date _____

Signature _____

Amount Wycliffe member/project name For office use only

	Nora Hajian; 53993	

VISA Mastercard

Name on card: _____

Card Number: _____
- - - - -

Expiry date: (mm/yy) ____ - ____

Check here if you wish to receive an individual receipt for each gift. Otherwise, an annual receipt will be issued for tax purposes.

Have you:

- 1) Filled in all parts of the form?
- 2) Signed the form?

Please return this form by:

Fax to: 403-250-2623

or ...

Scan and email to: receipts@wycliffe.ca

or ...

Mail to: Wycliffe Bible Translators of Canada
4316 10 St NE, Calgary AB T2E 6K3

3 Monthly Pre-authorized Bank Account Giving

Name _____

Address (for receipting purposes) _____

(City, Prov., Postal Code) _____

Phone _____

Email _____

Donor # (office use) _____

I hereby authorize Wycliffe Bible Translators of Canada Inc., to draw and issue cheques on the **1st** or the **15th** of each month, in the amount of \$_____.

Date _____

Signature(s) as required on cheques issued against this account.

X _____

X _____

Amount Wycliffe member/project name For office use only

	Nora Hajian; 53993	

Check here if you wish to receive an individual receipt for each gift. Otherwise, an annual receipt will be issued for tax purposes.

Have you:

- 1) Filled in all parts of the form?
- 2) Signed at the x?
- 3) Enclosed a blank cheque marked "void"?

Please return this form by:

Fax to: 403-250-2623

or ...

Scan and email to: receipts@wycliffe.ca

or ...

Mail to: Wycliffe Bible Translators of Canada
4316 10 St NE, Calgary AB T2E 6K3