



"Family Centre - Building Healthy Families"

Receipt #

PLEDGE FORM:

DONATION AMOUNT:

Family Centre Society of Southern Alberta is a registered non-profit charity and accepts donations to help children and families with counselling, programs and support.

I would like to support Family Centre. My donation amount is \$ _____.
I would like my donation to:

Your Name: _____

- support Family Centre's programs.
- to support a specific program, please have someone contact me to discuss this further.
- to be a Gift-in-Kind donation, please have someone contact me to discuss this.
- to be a planned-gift donation, please have someone contact me to discuss this.

Company (if applicable): _____

I want my donation recognized as this: _____

Address: _____

THANK YOU. Please keep a copy of this pledge for your records and return the original to Family Centre with your donation. All information will be kept confidential. Tax receipts will be issued for donations of \$15 or more. Please mail to:

City: _____ Province: _____

Postal: _____ Phone: _____ Date: _____

**Family Centre, Suite 225, 200 - 4 Avenue S., Lethbridge Centre,
Lethbridge, Alberta, T1J 4C9
Charity Number: 11915 7394 RR0001.**

- Please acknowledge me in Family Centre's recognition program, website and promotions. Recognize me by: My name My company My Logo
- I prefer that my donation remains Anonymous

Healthy Children... Healthy Families... Healthy Community

Family Centre: 403-320-4232 www.famcentre.ca