

DECADES DANCE

A 90'S THROWBACK EXPERIENCE

THANK YOU!

(donor name)

for committing \$ _____ towards
the Decades Dance in support of programming at
The Kimel Family Centre for Brain Health & Wellness

I would like to make a personal donation*:

Preferred receipting:

Tax receipt for

(donor name)

OR

Business acknowledgement letter for

(donor name)

Preferred name for recognition:

I would like to be a sponsor**:

Would you like to be recognized on event signage? Yes No

Please provide logo, or listed name for recognition:

Payment method:

Cheque: Please mail to: The Baycrest Foundation, 3560 Bathurst St. Toronto, ON M6A 2E1

Credit Card: The Baycrest Foundation will contact you to collect payment information.

Address:

City:

Province:

Postal Code:

Email Address:

Phone Number:

Please email my receipt to:

**GENERATION
NEXT**

SUPPORTING

Baycrest

*A tax receipt or business acknowledgement letter will be issued following the event (in the maximum amount allowable as per CRA guidelines).

**A business acknowledgement letter will be issued.