



DONATION FORM

I would like to make a gift to Fringe Theatre! I will make a...

One-time gift.

Recurring monthly gift.

In the amount of: \$25 \$75 \$125 Other: \$ _____

PAYMENT INFORMATION

Cheque (payable to Fringe Theatre)

Visa

MasterCard

American Express

Credit Card Number

Expiry Date

Security Code

Date: M/D/Y

Signature

PERSONAL INFORMATION

First Name (or Organization Name)

Last Name

Phone Number

Street Address

City, Province

Postal Code

Email Address

Please write the way you would like your name to appear in recognition materials:

Thank you for your support!

A charitable tax receipt will be issued for the full amount of your gift.

Forms and gifts can be mailed to:

ATB Financial Arts Barns, Fringe Theatre, 10330 84 Ave, Edmonton, AB T6E 2G9

Fringe Theatre respects your privacy. We protect your personal information and adhere to all legislative requirements with respect to your privacy. We do not rent, sell, or trade our mailing list. The information you provide will be used to deliver services and to keep you informed regarding activities, programs, special events, or opportunities. Fringe Theatre strives to raise \$1M this year and has an estimated cost of fundraising of 25%. Charitable Registration No: 11885 3506 RR0001

www.fringetheatre.ca