

Yes! I want to partner with Alpha.

**Alpha Ministries Canada**

#101 - 26 Fourth Street
New Westminster, BC | V3L 5M4
1.800.743.0899

alphacanada.org/ChristmasGift

Gift Amount:

\$50 \$100 \$250 \$400 \$500 Other:

Gift Type:

One-time **Monthly** 1st of each month 15th of each month

Payment method:

Credit Card Visa Mastercard

Card Number:

Expiry: / CVC:

Name:
First Middle Last

Signature: Date:

Cheque (one-time gift)

Please mail your cheque in the enclosed envelope.

Direct Withdrawal (monthly gift)

I give my bank or institution permission to transfer the sum indicated above from my account each month to Alpha Ministries Canada.
I have enclosed a cheque for the first month, plus a void cheque.

An income tax-deductible receipt will be issued by Alpha Ministries Canada for gifts of \$20 or more. Charitable Registration No. 87260 6157 RR0001

Please fill out both sides

Please take a moment to complete this form. All info is strictly confidential.

Title: _____ Name: _____

Mailing address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Email: _____

Would you like to receive email updates from Alpha?

Yes (If you haven't already done so, please provide your email address.)

Legacy Giving

Please send me information about leaving a gift to Alpha Canada in my will.



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Please fill out both sides