

YES! I would like to make a contribution to CHEP Good Food!



Name: _____

Address: _____ Postal Code: _____

Email: _____ Phone: _____

I would like to receive e-newsletters from CHEP Good Food

1. I want to support CHEP Good Food through pre-authorized monthly donations:

Start date: _____ End Date: _____

Please charge my credit card (enter account information at bottom of form)

\$25 \$50 \$100 \$150 \$200 \$_____ Other

the 1st day of the month the 16th day of the month

2. I'd like to make a single donation

\$50 \$100 \$200 \$500 \$1000 \$_____ Other

3. Please assign my donation to a specific CHEP program (indicate preference):

- Collective Kitchens
- School Nutrition (incl. Milk Matters)
- Community Gardens
- Good Food Box (Karma Box program)
- Nutrition Education
- Urban Agriculture Internship

4. I'd like to give by:

- Cheque or money order (payable to CHEP Good Food)
- Post-dated cheques (for monthly gift only)
- Visa or Master Card

Credit Card Payment

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Card Expiry (Month/Year): ____ / ____

Visa MasterCard

Name as shown on card: _____

Cardholder signature: _____ Date: _____

THANK YOU. Your generosity helps feeds generations.