

The Queen Alexandra Foundation for Children  
General Donation Form

Title (please circle):

Mr. Mrs. Ms. Miss Other \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Donation information:

I would like to donate \$ \_\_\_\_\_ to the children and youth of Vancouver Island.

I have enclosed a cheque made payable to the Queen Alexandra Foundation.

OR

Please charge the donation amount listed above to my (please circle):

VISA          MasterCard

Cardholders name: \_\_\_\_\_

Credit Card number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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Once complete, please send this form by mail to:  
The Queen Alexandra Foundation for Children  
2400 Arbutus Road  
Victoria BC V8N 1V7

**Thank you for  
supporting children,  
youth and families on  
Vancouver Island and  
the Gulf Islands!**

OR

Fax this form to the Queen Alexandra Foundation office at 250-721-6715.

If you have any questions about your gift to the Foundation, please call 250-721-6723.

*\*Your tax receipt will be mailed to you within 5 business days after your gift is received.*