



ST ANDREW'S COLLEGE



ST ANDREW'S PREPARATORY

#ACADEMIC EXCELLENCE PROJECT

DONATION FORM (Canadian version)

PERSONAL DETAILS:

NAME: _____

ADDRESS: _____

ZIP CODE: _____

E-MAIL: _____

TELEPHONE: (H) _____ (W) _____ MOBILE: _____

If you are an Old Andrean, please complete the following: HOUSE: _____ YEAR: _____

MY COMMITMENT: I will make a donation which totals: C\$ _____

DONATION OPTIONS:

Option A: I will make my donation **over a 5 year period** as follows:

Monthly installments of C\$ _____ by check / direct deposit (*please indicate*) starting from _____ / _____ (month / year).

Annual installments of C\$ _____ by check / direct deposit (*please indicate*) starting from _____ / _____ (month / year).

Option B: I will make a **once-off** donation as follows:

- Check enclosed
- Proof of payment for direct deposit attached

For payments by check:

Your check should be made out to: **St Andrew's College Grahamstown Foundation of Canada**
and sent to: Michael Faralla, 28 Douglas Drive, Toronto, Ontario, M4W 2B3

For payments by direct deposit:

Banking details for direct deposit: Account name: St Andrew's College Grahamstown Foundation of Canada
Bank: TD Canada Trust
Branch Code: 0500
Account no: 5207 891
Reference: Academic Excellence & Your name

and fax your proof of payment to: Fax: 416-944-0719

OTHER OPTIONS:

- I would like to speak to the Headmaster about making a bequest.
- I would like to speak to the Headmaster about possible naming rights for a significant donation.
- I would prefer that my contribution remain anonymous.

Signature: _____ Date: _____

St Andrew's College Grahamstown Foundation of Canada (SACGFC)
Revenue Canada Charitable Business Number: 87155 6601 RR0001
