

Date \_\_\_\_\_

Donor Information

I am donating on behalf of:  an organization or  an individual

Name \_\_\_\_\_

Organization name \_\_\_\_\_  
(if applicable)

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

Mailing address \_\_\_\_\_

Postal code \_\_\_\_\_

Donation

Fee: \$290 per registration in the week long camp

Number of children to be sponsored with this donation \_\_\_\_\_

Payment Information

Total payment submitted \_\_\_\_\_ children x \$290 each = \$ \_\_\_\_\_



**Collection and Use of Personal Information**

Personal information is collected in accordance with section 3 of the *Municipal Government Act* and section 33(c) of the *Freedom of Information and Protection of Privacy Act* (FOIP) and is protected by FOIP. It will be used to process your donation regarding TOTAL Under the Big Top. If you have any questions about the collection and use of your information, contact the Coordinator, Central Services, Recreation, Parks and Culture at 780-467-2211.

REC 27120/A

✂ -----

The information below is collected and will only be used to make the authorized credit card payment for this approved one time amount. The information will not be copied, distributed or otherwise disclosed in any manner without prior approval.

This information will be processed and then immediately destroyed.

Paying by: <input type="checkbox"/> cheque <input type="checkbox"/> credit card <input checked="" type="checkbox"/> AMEX <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa Please make cheques payable to Strathcona County, Under the Big Top		Cardholder name
Card number	Expiry date	Signature