



# March Is Easter Seals Month DONATION FORM

**March** IS  
**Easter Seals Month**  
Fundraising and Awareness  
for kids with physical disabilities

Make all cheques payable to "Easter Seals Ontario."  
Please ensure complete address provided and check receipt preference.

LOCATION:

TEAM NAME:

PARTICIPANT NAME:

TELEPHONE: (    )

E-MAIL:

PLEASE COMPLETE DONORS NAME AND COMPLETE ADDRESS EVEN IF WE ARE ISSUING AN E-MAIL RECEIPT. PLEASE PRINT CLEARLY WE CANNOT GUARANTEE A TAX RECEIPT IF INFORMATION IS NOT CLEAR.			AMOUNT DONATED	PAID ✓	PHYSICAL RECEIPT PREFERRED	E-RECEIPT PREFERRED
			Example: \$50.00	✓		Y
Last name First name						
Apt. #/TH/Suite	Street Address	City Postal Code				
E-mail address (required for e-receipt to be issued)						
Last name First name						
Apt. #/TH/Suite	Street Address	City Postal Code				
E-mail address (required for e-receipt to be issued)						
Last name First name						
Apt. #/TH/Suite	Street Address	City Postal Code				
E-mail address (required for e-receipt to be issued)						
Last name First name						
Apt. #/TH/Suite	Street Address	City Postal Code				
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Apt. #/TH/Suite	Street Address	City Postal Code				
E-mail address (required for e-receipt to be issued)						
Last name First name						
Apt. #/TH/Suite	Street Address	City Postal Code				
E-mail address (required for e-receipt to be issued)						
TOTAL			\$			

Please choose only one method for your tax receipt. Tax receipts can be emailed if the donor's e-mail address is provided and they opt for an e-receipt, otherwise the tax receipt will be mailed post-event.

Easter Seals Ontario, One Concorde Gate, Suite 700, Toronto, ON M3C 3N6  
For more information, please contact [info@easterseals.org](mailto:info@easterseals.org) or visit [marchiseastersealsmonth.org](http://marchiseastersealsmonth.org).