



Donor Form

Date: _____

Name of Business (if applicable): _____

Contact Name: _____

Address: _____

(Please make sure the address is complete including postal code)

Telephone: _____

Email: **(Required)** _____

(To save on postage, Thank You's & Tax Receipts will be sent via email)

Donation and Description: _____

Value: \$ _____

Charitable tax receipt requested Yes No

NOTE: If a charitable tax receipt requested, the original sales receipt **MUST** be attached to this form. If an original picture/painting is donated, an appraisal form **MUST** accompany this form.

Rowbust Breast Cancer Survivor Dragon Boat Racing Team is a registered charity (#86212 2199 RR001). All proceeds from your donation will go to benefit the team. On behalf of Rowbust members, thank you for your generosity!

Does Rowbust member require a thank you card for this donor? Yes No

Team Member Contact: _____

Team Member Telephone: _____