Pledge Form

|  |  |
| --- | --- |
| A logo with a person in the shape of a heart  Description automatically generated | Human Emergency AID &Rehabilitation Trust (Inc.)Registered Charity Number: 848695409RR0001 |

### Donor Information (please print or type)

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| City, ST, Postal Code |  |
| Phone 1 | Phone 2 |  |
| Fax | Email |  |

### Pledge Information

I (we) pledge a total of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to be paid: now monthly quarterly yearly.

I (we) plan to make this contribution in the form of: cash check credit card other.

|  |  |
| --- | --- |
| Credit card type | Exp. date |  |
| Credit card number & 3 digit code |  |
| Authorized signature |  |

### Acknowledgement Information

Please use the following name(s) in all acknowledgements:

I (we) wish to have our gift remain anonymous.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature(s) |  | Date |
|  |  |  |
| Please make checks, corporate matches,  or other gifts payable to: |  | Human Emergency AID &Rehabilitation Trust (Inc.)5978 Couples StreetMississauga, ON L5V2Z5 |