



Donation – In Memoriam

GIFT INFORMATION:

Donation Amount:

Donation Frequency:	One-Time	Annually	Semi-Annually
	Quarterly	Monthly	Weekly

Tribute Type: *Tribute Details:

- in honor of
- in memory of
- in celebration of
- for the birthday of
- for the anniversary of
- on behalf of Troop

*Please enter as many details as possible in the “Tribute Details” section above.

For example, if you picked “in memory of...” please provide:

- Name of person being remembered
- Rank, if a member or retired member of the RCMP
- Name and contact information of a family member of the deceased so that we can make sure they know a donation was made

If you picked “in memory of a Troop...” please provide:

- Troop number and year of graduation

I would like to remain anonymous

CONTACT INFORMATION:

Title:

First Name:

Middle Name:

Last Name:

Suffix:

Address:

City:

Province/State:

Postal Code/Zip Code:

Country:

Email:

Phone:

PAYMENT INFORMATION:

Amount:

Payment: Cheque payable to the Friends of the Mounted Police Heritage Centre

Visa

MasterCard

Name on Card:

Card Number:

Expiration Date:

CVV2 Number (back of card):