



Flyingbow Music Ministry | Charitable tax number: 80824 0691 RR0001
39 Fairmeadow Drive, Guelph, ON N1H 6X2
1-519-803-1460

Date: _____

Name of Flyingbow artist/project I am supporting. Write "general" if you want it to go to area most needed: _____

I would like to help in the following way:

- Support with a monthly gift of
 - \$ 25/month
 - \$ 75/month
 - \$100/month
 - Other _____

- Support with a gift at this time of \$ _____
Please make your cheque payable to Flyingbow Music Ministry.

RETURN THIS GIFT IN THE ENVELOPE PROVIDED

I would like to make my contribution the following way:

- Pre-Authorized Payment **(See Reverse)**
- Credit Card Visa Mastercard

Credit Card #: _____

Exp: ____/____ CVV (3 digit code): _____

Signature: _____

- I also intend to support in this amount next year if I am able.

NAME: _____ EMAIL: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____ PHONE #: _____

**Spending of funds is confined to board-approved programs and purchases. Each gift designated toward an approved program will be used as designated with the understanding that when any given need has been met, or cannot be completed for any reason, designated gifts will be used where needed most. Gifts will be acknowledged and receipted with an official receipt for income tax purposes.*



FLYINGBOW

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Date: _____

Monthly Pre-Authorized Bank Payment - Attach a void cheque or fill out the following information:

Account Number:

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Branch Transit Number:

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Financial Institution Number:

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Chequing Account

Savings Account

Financial Institution: Name: _____

Branch Address: _____

I authorize Flyingbow to charge me on the 1st day of each month for the prepayment of my pledge.

Signature: _____

Donate online *via credit card* at www.flyingbow.com/donate

*With this authorization, we will process all future monthly donations automatically until otherwise directed.
In the event of starting, cancelling or changing a monthly donation, please notify Flyingbow one month in advance.*