



Memorial & Commemorative Donations

I _____ would like to make a donation to
Please print your name

the Colchester East Hants Hospice Society of \$ _____ in honour of
Amount of donation

Name of the person being honoured as you would like it to appear

Your signature

Date

Please send the tax receipt to:

Name: _____
Please print your name

Address: _____

City/Province/Postal Code: _____

Phone Number: _____

Email Address: _____

Please send a card acknowledging the donation to:

Name: _____

Address: _____

City/Province/Postal Code: _____

Please include your cheque or money order with this form and mail to:

Colchester East Hants Hospice Society

89 Queen Street

Truro NS B2N 2B2

Phone: 902-893-3265