



Transformation HSC Campaign

Donation and Pledge Form

One-time Gift:

I am pleased to make a one time gift of \$ _____.

Monthly Gift:

I would like to give a total of \$ _____, in monthly installments of \$ _____ each, beginning in the month of _____, _____ YEAR.

Pledge:

I am pleased to make my pledge of \$ _____ over _____ years. My first installment will be provided on _____ and the balance of payments will occur Monthly Quarterly Semi-Annually Annually (please indicate one) commencing on _____.

Name: _____

Address: _____

Telephone: _____ E-mail: _____

My payment method will be:

Cheque Visa MasterCard HSC Account Online: www.hsc.on.ca

Card Number: _____ Expiry Date: _____

Name on Card: _____ Security Code*: _____

Signature: _____

**Security code is the last three digits on the back of your credit card.*

Cheques payable to: **"Hillfield Strathallan College"**
299 Fennell Avenue West, Hamilton, ON L9C 1G3

In accordance with CRA guidelines, when paying by cheque, tax receipts will be issued to the person/business on whose account the cheque is drawn from.

Recognition Opportunities:

I wish to direct my gift to: _____
(Specify the naming opportunity request associated with your gift. This should be completed with the assistance of the Director of Advancement for gifts directed to specific naming opportunities within the Campaign.)

All naming opportunity gifts will be subject to a Gift Agreement which specifies precise recognition benefits associated with the donation.