



**Organic Agriculture
Centre of Canada**

I am / we are pleased to contribute by making the following gift to the OACC Foundation:

Total commitments \$ _____

I would like to make a one time donation \$ _____

or

I would like to make an annual donation of:

\$50 \$75 \$100 \$150 \$ _____

in each of the following years (please circle): 2009 2010 2011

or

I would like to make a monthly donation of:

\$10 \$15 \$20 \$25 \$ _____

Start Date: _____ for the following number of months

(please circle): 12 24 36 or _____

Method of Payment:

Cheque (please make cheque payable to **OACC Foundation**)

Post dated cheques (*enclosed*)

VISA Pre-authorized chequing (see next page)

Card Number

Expiry Date

Card Holder Name (please print)

Card Holder Signature

Please mail donation to: OACC Foundation, P.O. Box 550, Truro, N.S., B2N 5E3

A charitable tax receipt will be issued for your donation. Thank you!!



**Nova Scotia
Agricultural
College**

Pre-Authorizing Chequing Plan:

Please note that pre-authorized chequing can only be used with Canadian Bank Accounts

PERSONAL INFORMATION

Name: _____

Address: _____ Apt #: _____

City/Town/Village: _____ Prov: _____

Postal Code: _____ Telephone #: (____) _____

E-mail: _____

BANKING INFORMATION

Bank, Credit Union or Trust Company _____

Address: _____

City/Town/Village: _____ Prov: _____

Postal Code: _____ Telephone #: (____) _____

Account #: _____

Please attach a sample cheque marked "VOID"

Please deduct \$ _____ on the first of each month, **starting** on

(month/year) _____/_____ and **ending** on (month/year)

_____/_____ *or* **Until notified**

I/We agree that the OACC Foundation may process charges to my/our account for the purpose of donations to the Organic Agriculture Centre of Canada (OACC).

Signature _____ Date _____

Signature _____ Date _____