

Leaders *for* mental health *breakfast*

Gift Detail

My Table Captain is: _____

Amount: ☐ \$5,000 ☐ \$2,000 ☐ \$1,800 ☐ \$1,500 ☐ \$1,200 ☐ \$ _____

Frequency: ☐ One-time ☐ Over 12 monthly installments*

*All installments will be processed on or around the 15th of each month for 12 consecutive months.

Donor Information

Is this gift on behalf of an organization? ☐ Yes ☐ No

If yes, Organization name: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Email Address: _____ ☐ Home ☐ Business

Phone #: _____ ☐ Home ☐ Business ☐ Mobile

☐ The Royal Ottawa Foundation may recognize this donation publicly.

☐ I prefer that this donation remain anonymous.

Recognition name: _____

Payment Options

☐ **Credit Card** Name as it appears on card: _____

Card#: _____ Expiry Date: _____ / _____ CVV: _____

☐ **Cheque enclosed**, made payable to *Royal Ottawa Foundation for Mental Health*

☐ **Electronic Funds Transfer (EFT)** to *Royal Ottawa Foundation for Mental Health*

TD BANK (240-45 O'Connor Street, Ottawa, ON K1P 1A4)

Institution#: **004** Transit#: **03546** Account#: **7947 5282120**

☐ **Bank Debit/Pre-authorized withdrawal** - Please include a void cheque, bank document, or complete the section below.

Institution#: _____ Branch Transit#: _____ Account#: _____

By signing below, I authorize the Royal Ottawa Foundation for Mental Health to process my gift or pledge in the amount indicated above and in accordance with the payment option I have selected.

DATE: _____ SIGNATURE: _____

☐ Please contact me about becoming a table captain at or attending the 2024 Leaders for Mental Health Breakfast.

☐ I would like to be contacted to learn more about the work of The Royal.

Please return this completed form by mail to:

Royal Ottawa Foundation for Mental Health, 1145 Carling Ave., Ottawa, ON K1Z 7K4

by email: events@theroyal.ca

Charitable registration # 119129179 RR0001