



DONATION FORM

Please make Cheque payable to Serenity House Hospice

Mail To:
Serenity House Hospice
PO Box 20172
St. Thomas, Ontario
N5P 4H4

I would like to make the following donation:

- One time donation in the amount of \$_____
- Monthly donation for a total amount of \$_____
(Please provide a series of post dated Cheques)
- If this donation is being made in memory of someone please complete the following:

In Memory of: _____

Family Member that Thank you card should be sent to:

Name: _____

Address: _____

Postal Code: _____

- Donors information:**

Name: _____

Address: _____

Postal Code: _____

**Email address:* _____

* this is optional – we will only use your email to send you information about Serenity House and our quarterly newsletters.