



Pledge Form

YES! I want my donation to help a greater number of people have free access to Tel-Aide Montreal's listening service.

Donation Amount: _____\$

Payment Method

To make a secure donation online: www.telaidemontreal.org/en/donate/

🗌 Cheque 📘	Visa 🔲	Mastercard		
Cardholder Name	:			
Card Number:				
Expiration Date:	MM / YY	CVV*:		

 \ast The CVV is the 3-digit code located at the back of your card, next to the signature

Income Tax Receipt Contact Information: (Issued for all donations of \$25 or more)

Name:		
Company:		
Address:		
City:	Province:	Postal Code:
Telephone:	Email:	
I prefer to receive the tax receipt \Box	by email	
C	by mail	
		Thank you

P.O. Box 97557, CSP Wellington, Verdun, QC, H4G 3M6 Administration 514-935-1105 | Listening service 514-935-1101 www.telaide.org | info@telaide.org Canada Revenue Agency Registered Charity Number: 10516 4800 RR0001