

# CAMP HERMOSA INCORPORATED



## HERE IS MY GIFT TO SUPPORT THE MINISTRY AT CAMP HERMOSA.

I wish to support Camp Hermosa with a one-time donation with the information below.

I wish to support Camp Hermosa on a regular basis.  I authorize the Camp Hermosa Treasurer to deduct the amount below from my credit card each month until further notice.  I have attached postdated cheques.

**AMOUNT:**  \$25  \$50  \$100  Other \$ \_\_\_\_\_

1. Payment Method:  Cheque(s) made payable to Camp Hermosa Incorporated

2. Visa  MasterCard  Card #: \_\_\_\_\_ Expiry Date: \_\_\_/\_\_\_

Cardholder's Signature: \_\_\_\_\_ (Payment will be processed on the 15<sup>th</sup> of each month.)

Please use my gift:  Where Needed Most  Operating Fund  Bursary Fund  Capital Fund

Name \_\_\_\_\_ Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Mail to: Camp Hermosa Inc., Treasurer, 40 Heather Ave., Cambridge ON, N3C 3C2** TAX ID # BN 118827237 RR0001