

Donation Form

Name: _____

Telephone Number: _____

E-mail Address: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Would you like to receive information about what's happening at Birch?

yes no

Amount Donated: \$ _____

Make checks payable to:

Birch Mountain Sports

25 Kolly St

Notre Dame de Lourdes, MB

R0G 1M0

COMMENTS: _____

