BC SPCA
LOCK-IN FOR LOVE

Pledge Form

1) My info

Mikaela Curdyk	Shuswap	1850 – 743
Name of Participant Being Supported	Animal Centre Location	Constituent ID – Fundraiser Page ID

☐ **Individual** ☐ **Organization**

If from organization, use First & Last Name for the contact person. Receipt will be issued in organization name, and sent to the contact's attention

First Name*	MI.	Last Name*
Organization*		
Suite/apt. No	Street*	
City *	Prov/State*	Postal Code/ZIP *
Phone (REQUIRED)*	**E-mail Address* (REQUIRED FOR E–RECEIPT)**	

2) Gift details

Amount $ _____

How would you like to be recognized online?

○ Donor name (same as above)
○ Anonymous
○ Name for Recognition: _____

3) Payment   *On behalf of the animals, thank you for supporting the BC SPCA.*

○ **Cheque or Money order –**
Payable to BC SPCA
When can we expect it? _____

○ Cash
When can we expect it? _____

○ **Credit Card**
☐ Visa
☐ Mastercard
☐ AMEX

Card Number _____   Expiry Date _____

Cardholder Name _____   CVC _____

For Internal Use Only:

Fund	RE Batch Number