



Baycrest Foundation

CARD ORDER FORM

I would like to send my cards with the following message:

I would like my cards to be signed "From" Name(s): _____

Address: (to be shown on card) _____

Is billing information different from above? Yes No

If yes, please complete the following:

Name: _____

Address: _____

Apt.: _____ PC/Zip: _____

Phone: _____

Fax: _____

E-mail: _____

I would like my contribution to be designated to:

Baycrest's most urgent needs

My Baycrest fund!

Name of fund: _____

Please mention my fund: Yes No

Payment Method:

VISA MasterCard AMEX # : _____ Expiry: _____

Cheque enclosed payable to: The Baycrest Centre Foundation

Please send my cards to the following names and addresses:

- | | |
|---|---|
| 1. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ | 5. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ |
| 2. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ | 6. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ |
| 3. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ | 7. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ |
| 4. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ | 8. Name: _____
Address: _____
Apt.: _____ PC/Zip: _____ |

To place your order, please return this form and your list of names with complete addresses:

- by FAX 416-785-4296
- by e-mail donations@baycrest.org
- by phone 416-785-2875 / 1-800-223-2087

Please also send my cards to the following names and addresses:

9. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

18. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

10. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

19. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

11. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

20. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

12. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

21. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

13. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

22. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

14. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

23. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

15. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

24. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

16. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

25. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

17. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____

26. Name: _____
Address: _____

Apt.: _____ PC/Zip: _____