



Donation Form

First and Last Name: _____

Street Address: _____

City: _____

Province: _____ Postal Code: _____

Phone Number : _____

Email Address : _____

I wish to donate _____\$ to help support Le Versant's mission.

I would like an official receipt for my income taxes: Yes ___ No ___

Signature : _____ Date : _____

To send your donation by Interac e-Transfer, please send an email to info@leversant.org to get details on how to proceed.

You can print this form and sent it with your check to:

Le Versant a/s l'Arc-en ciel, 63 de l'Église, Vaudreuil-Dorion, J7V 1W6

