



DONATION FORM

Please complete all the details in the form below and send it along your donation cheque. This form will ensure we have your correct mailing address to send your tax receipt.

First Name: _____

Last Name: _____

Address: _____

City _____

Province _____

Postal Code _____

Email:

Your email will only be used for sending an e-receipt for tax purposes

Donation Amount: \$

Cash

Cheque#

Cheque Date

Please mail cheques to : _____ Zoroastrian Society of Ontario

Attn: Treasurer

3590 Bayview Ave

North York, ON, M2H 3S6

****All cheques must be payable to Zoroastrian Society of Ontario. Cheques payable to 'ZSO' will be rejected by the bank and not processed.**

[All fields of the donation form MUST be completed and attached with your donation. Incomplete form or donations which don't include this form will NOT be issued a tax receipt. This form helps us ensure we have the most up to date and accurate information to issue a tax receipt.]