

Donation Form



YES! I would like to contribute to the
Hanover Splash Pad

Name: _____ Company: _____

Name for Income Tax Receipt (if different than above): _____

Address: _____

Town: _____ Postal Code: _____

Telephone: _____ Email: _____

Donation Amount: _____

Payment Information:

- Request to be invoiced
- Cash (Enclosed)
- Cheque
- E-Transfer** (Send transfers to **donations@hanover.ca**. In the notes section of the transfer include 'Splash Pad Donation', donor's full name and full address for tax receipt.)

**A tax receipt will be provided for any donation of \$20.00 and above.

Date: _____ Signature: _____