



Autism Society Canada  
Société canadienne de l'autisme

**Donations**  
**Jonathan Howard – Run The Dream Fund**



Ways to donate

- 1) Complete and return this form, or
- 2) Online at [www.runthedream.ca](http://www.runthedream.ca), or
- 3) e-mail money transfer via your online banking to: [mydonation@runthedream.ca](mailto:mydonation@runthedream.ca)

In order to ensure that a tax receipt can be issued please provide complete information

**PLEASE PRINT ALL INFORMATION**

Mr.       Mrs.       Ms.       Miss       Dr.

First Name \_\_\_\_\_ Init. \_\_\_\_\_ Last Name \_\_\_\_\_

If a Corporate Donation – Business Name \_\_\_\_\_

Address (Street Number and Name, RR, P.O. Box etc) \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Email \_\_\_\_\_ Phone Work: (\_\_\_\_) \_\_\_\_\_ Home(\_\_\_\_) \_\_\_\_\_

Other than to issue your charitable donation tax receipt we will not communicate further unless you request us to do so. Please send me additional information from:  Autism Society Canada , by  e-mail and / or  postal mail  Run The Dream (available only by e-mail). You may unsubscribe from either organization at any time by following the instructions on any communication.

**Yes! I would like to support Jonathan Howard's dream!**

1. **Please direct my gift of \$\_\_\_\_\_ to the Run The Dream Fund.  
My gift will be put to work in communities across Canada where it is needed most.**
2. **Please direct my gift of \$\_\_\_\_\_ to the province of my choice. (Province)\_\_\_\_\_  
My gift will be put to work where it is needed most in communities in the designated Province.**

My total donation is: \$\_\_\_\_\_ (complete area above to assign your donation to a specific activity. If you make no assignment, your donation will automatically be applied to the Option 1, the national Run The Dream Fund)

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year

Method of Payment
Cash / Cheque / Money Order (made payable to Autism Society Canada - indicate Jonathan Howard – Run The Dream Fund on your cheque) \$ _____
Credit Card (Visa or MasterCard) \$ _____ Credit Card # _____
Name as it used on the credit card _____
Expiry Date: ____/____ Month Year
Tax receipts will only be issued for gifts of \$20.00 or more.

Thank you for supporting Run The Dream and the Autism Society Canada! Tax receipts will be issued by Autism Society Canada, Jonathan Howard – Run The Dream Fund, Canada Revenue Agency Registration number 131607657RR0001.

**When completed please return this form:**

- 1) if in person, to your local organizer,
- 2) by postal mail, along with your cheque, money order, or credit card information to: Run The Dream, P.O. Box 84513, 2336 Bloor Street West, Toronto ON M6S 4Z7. **PLEASE DO NOT SEND CASH THROUGH THE MAIL.**
- 3) if a credit card donation only you may fax the form to 1-888-453-7776