



Honor / Memorial Gift Form

Please mail to:

Deltassist Family and Community Services
9097 120 Street
Delta, B.C. V4C 6R7

Thank you for choosing to honor or remember someone special in your life with a gift to Deltassist Family and Community Services

Your information:

Name:

Address:

City: _____ Province: _____

Postal Code: _____ Country: _____

Email: _____

Home Phone: _____ Work Phone: _____

Gift type: Memorial gift Tribute gift

In honor/memory of

(Please attach additional gift information if necessary.)

Designate gift to:

Highest Priority Need or Specific Program (Name program)_____

Please send gift acknowledgment to:

Name:

Address:

City: _____ Province: _____

Postal Code: _____ Country: _____

Gift amount: \$ _____

Payment information:

Check enclosed

Card Type: Visa MasterCard

Name on Card: _____

Card Number: _____

Card Expiration: _____ CCV*: _____

*3-digit code on the back of your Visa, MasterCard

Signature:

Yes, I would like to receive e-mail news, updates, and more from Deltassist Family and Community Services. I understand I can unsubscribe at any time.

If you have any questions or comments, please contact us at inquiry@deltaassist.com or by calling 604-594-3455

Thank you for your support!