

**Contact information**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

E-mail: \_\_\_\_\_

 I wish to receive my newsletter by  e-mail  mail.

**Membership**

- |   |                                     |       |
|---|-------------------------------------|-------|
| <input type="checkbox"/> New membership     | <input type="checkbox"/> Individual | \$25  |
| <input type="checkbox"/> Membership renewal | <input type="checkbox"/> Family     | \$45  |
| <input type="checkbox"/> Gift membership    | <input type="checkbox"/> Senior     | \$20  |
|   | <input type="checkbox"/> Student    | \$20  |
|   | <input type="checkbox"/> Lifetime   | \$300 |

**Donation — monthly or single gift**

 Is a tax receipt requested?  Yes  No

 I want to provide ongoing support to the shelter's animals with **monthly donations\*** of:

 \$10  \$20  \$50  \$ \_\_\_\_\_

 Please accept my **single donation** of:

 \$25  \$50  \$100  \$ \_\_\_\_\_

 **Guardian Angel** for 6 months — \$250  
*(includes kennel plaque)*

 Membership card given  Family Secondary Member \_\_\_\_\_ Tel/E-mail: \_\_\_\_\_

**Make your giving even more special: Donate or buy a membership in someone's name!**
 This is a gift in memoriam.  This is a gift in honour of (occasion): \_\_\_\_\_

Pet \_\_\_\_\_ Person \_\_\_\_\_ Please send notice of donation to:

Name and address: \_\_\_\_\_

**Payment method**
 Attached is a cheque payable to the Kingston Humane Society (see below for monthly donations from chequing account).

**Credit card authorization**

 \* Monthly *(I may cancel at any time)*  One-time

 Please bill my credit card:  VISA  MasterCard  American Express

Card number: \_\_\_\_\_ Expiry date: \_\_\_\_/\_\_\_\_

Name (as it appears on card): \_\_\_\_\_

 Signature of cardholder: \_\_\_\_\_ or by phone 
*By signing above, cardholder agrees to pay all charges as detailed in cardholder agreement.*
**\*Chequing account authorization for monthly donation**
 I hereby authorize the Kingston Humane Society to deduct \$ \_\_\_\_\_ from my personal chequing account on the first of each month. *(Please enclose a cheque marked "Void" so that we may make arrangements with your financial institution.)*
**Special donation instructions:**  Please list my donation as anonymous.

 Please use my donation for: \_\_\_\_\_ If not specified, your donation will be used to meet the greatest current needs.

**Privacy statement:** All information on this form is protected by current privacy legislation. By completing this form you agree to permit the Kingston Humane Society to contact you about special programs and events. Information on this form will not be published or shared without your express consent.

 Please check if you do not wish to receive any further information from the Kingston Humane Society.

 For internal use only — **must be filled out by staff.** Date received: \_\_\_\_\_ Staff initials: \_\_\_\_\_

 Payment method:  Cash  Credit Card  Debit  Cheque (photocopy cheque and attach to this form)