

OUR MISSION

The Foundation's mission is to support and encourage the professional development and financial independence of local women by providing them with the means to realize their full potential. The Lise Watier Foundation's vision is for all women to fulfill their potential and contribute to our economy, creating a richer, more equitable society.

MONTHLY DONATION FORM

Contact details			
Name of donor		Name of contact person (if applicable)	
Address	Tow	n Zip code	
Phone number	Email address	Solicited by (if applicable)	
Donation			
Amount of donation: ^{\$}			
An official receipt for income tax pur	poses will be sent for a	ll donations of \$20 or more.	
For the eligible portion of you	ur donation, please	e produce an official tax receipt	
Personal			
Name to appear on the tax receipt	Do	pnor Email	
Address	Cit	У	
State	Ziŗ	o code	
Paiement			
Online payment by credit card: <u>http://weblink.donorperfect.com/monthly-ceptert.com</u>		Postdated cheques in the amount of \$ payable to the Lise Watier Foundation	
Automated recurring bank transfers transit number: 00081 / institution number: number: 0108822 / Branch address: BNC, 8 Street, 3rd floor, Montreal (QC) H3C 1A3	: 006 / account		

Consent to collect personal information

I consent to the collection, use, and disclosure of my personal information collected through this form in accordance with the terms described in the Lise Watier Foundation's <u>Privacy policy</u> for the purpose of collecting monthly replenishment amounts and/or occasional one-time payments for the settlement of all amounts charged to my account(s) with the Lise Watier Foundation.