



Tribute Giving Form

I would like to honour someone special by making a gift to the Mood Disorders Association of Ontario.

Name of Person being honoured: _____

I would like to make a tribute gift of \$_____ (minimum tribute gift is \$20)

Your Information:

Name :

Street Address:

City:

Province:

Postal Code:

Phone:

Email :

Payment Method

- Cheque (made payable to the Mood Disorders Association)
 Visa MasterCard

Card Number: _____ Expiry ____/____

Name on Card: _____

How should we send the acknowledgement card?

- By email:

Name of recipient: _____

Email address of recipient: _____

- By mail:

Name of recipient: _____

Mailing address of recipient: _____

- Do not send a card

Card Content:

Personal Message: _____

From: _____

Please include:

- A gift has been made in your honour to the Mood Disorders Association of Ontario

- A gift has been made to the Mood Disorders Association of Ontario in memory of _____

Mail or Fax the form to:

**Mood Disorders Association of Ontario
36 Eglinton Avenue West, Suite 602
Toronto, Ontario
M4R 1A1
(416) 486-8046
1-888-486-8236
Fax: (416) 486-8127**

THANK YOU!