Butterfly Society - Gift Notification Form

I/we			ve to join	the following	g Butterfly
Society of The Canad	ian Hearing Society	y.			
\$500 Spring	g Azure		\$5,000	Red Admiral	
\$1,000 Moi	iarch		\$10,000	0 Green Longw	ving
\$2,500 Red	-Spotted Purple	May 112 May 100			
As an Annual Memb	er				
As a Founding Mem	ber, I am pleased to m	ake a five-ye	ar pledge of	an annual gift	at my chosen level
Payment Method _ Cheque(s) Enclosed (Mac_ Visa _ MasterCard Card No	_ American Expres	SS		_	ww.chs.ca)
Name of Cardholder					
Special Note:					
* I do not wish my gift to b * My gift may be publicly (please print) Receipts should be sent t Address:	acknowledged. I would	like my name	to appear as:		
City	Province		PC		
Tel:	Phone _ T	ΓΥ _ VCO	Email:		
Signature			Date		
Please return Gift Notification Phone: 416-928-2500 Ext.	271 Spadir Toronto, C Attention:	na Road, 4 th Fl N M5R 2V3 Fundraising	ociety oor		