



I'd like to help the AAMAC provide information and support by donating funds and/or purchasing promotional items:

Thanks for your support!

Mr Mrs Ms Miss _____
first name last name

Address: _____ City: _____ Prov: _____ Postal Code: _____

Res. Phone: _____ Bus Phone: _____ Email: _____

Quantity	Item	Total
	Donation: <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> Other: \$_____	\$
_____	Tree of Life Dedication @ \$150 each: In <input type="checkbox"/> memory or <input type="checkbox"/> honour of: _____	\$
_____	LifeBlood bracelets (package of 10) @ \$20 each	\$
	Total (prices include shipping and handling):	\$

Cheque payable to "AAMAC" enclosed

Visa MasterCard Name on card/name to appear on receipt: _____

Card #: _____ Expiry: ____/____/____ Signature: _____

*mail to: AAMAC, 11181 Yonge Street, Suite 321, Richmond Hill ON L4S 1L2, or
 fax to: 905-780-1648, or
 call: 1-888-840-0039 or 905-780-0698 to charge by phone*