

Donation Form

YES! I want to support independent, fact-based journalism at The Walrus.

Name (as you wish to be recognized)				
Address:				
City:	Province:	Postal Code:		
Phone:	_ Email:			
☐ I wish to remain anonymous				
Option A: Single Gift				
☐ I am pleased to provide a single gift at this time. Gift Amount: \$				
Payment Options				
☐ I have enclosed a cheque payable to The Walrus Foundation				
☐ I prefer to pay by credit c	ard: Uisa	☐ MasterCard	☐ American Express	
Card #:	Ex	piry Date:		
Name on Card:	Name on Card: Signature:			
Option B: Monthly Gift				
-,,				
☐ I would like to make a mo	onthly gift. Gift Amount	: \$	_/month	
	onthly gift. Gift Amount	: \$	_/month	
☐ I would like to make a mo	_		_/month	
☐ I would like to make a mo	by credit card: ☐ Visa	☐ MasterCard	☐ American Express	
☐ I would like to make a month of the payment Options ☐ Pre-authorized payment in the payment i	by credit card: ☐ Visa lation to make automat	☐ MasterCard tic withdrawals from my cr	☐ American Express edit card monthly.	
☐ I would like to make a month of the payment Options ☐ Pre-authorized payment I authorize the Walrus Found	by credit card: ☐ Visa lation to make automat	☐ MasterCard	☐ American Express redit card monthly.	
☐ I would like to make a month of the payment Options ☐ Pre-authorized payment I authorize the Walrus Found Card #:	by credit card: ☐ Visa lation to make automat	☐ MasterCard tic withdrawals from my cr spiry Date:	☐ American Express redit card monthly.	
☐ I would like to make a monopole Payment Options ☐ Pre-authorized payment if I authorize the Walrus Found Card #:	by credit card: Visal V	☐ MasterCard tic withdrawals from my cr spiry Date: gnature:	☐ American Express redit card monthly.	
☐ I would like to make a monopole Payment Options ☐ Pre-authorized payment if I authorize the Walrus Found Card #:	by credit card: Visa lation to make automate Expenses. Signal copy of our annual regions your home or email at	☐ MasterCard tic withdrawals from my cr spiry Date: gnature: report to learn about the iddress based on your pre-	☐ American Express redit card monthly.	

A tax receipt will be issued for the maximum allowable amount according to CRA Guidelines.

Thank you for supporting Canada's conversation!

our offices at 411 Richmond St. E., Suite 15B, Toronto, ON M5A 3S5.