



Please complete and print the fillable form below to make your tax-deductable donation, and mail to:

CIJR, PO Box 175, Stn. H, Montreal, Quebec, H3G 2K7

Please select your donation level:

- | | |
|--|--|
| <input type="checkbox"/> \$90 - Member | <input type="checkbox"/> \$1000 - Benefactor |
| <input type="checkbox"/> \$180 - Supporter | <input type="checkbox"/> \$1800 - Founder |
| <input type="checkbox"/> \$360 - Guardian | <input type="checkbox"/> \$3600 - Lamed Vavnik |
| <input type="checkbox"/> \$720 - Patron | <input type="checkbox"/> Other - \$ _____ |

Name _____

Address _____

City _____

Province/State _____

Postal/Zip Code _____

Telephone: _____

Visa/Mastercard Number _____

Expiry ____ / ____ CVC ____

Name on Card _____

Please provide us with an email address so that we may add you to our Daily Briefing list:

Email _____

NOTE: If you are donating by cheque, you do not need to fill out the credit card information.