

## **MTYP Donation Form**

Yes! I want to engage and inspire youth through the power of theatre.

This form can be completed and mailed in with your cheque to: 2 Forks Market Road, Winnipeg MB, R3C 4X1
Or email your form to: hstruck@mtyp.ca

## **One—Time Donation**

Yes	, I want to make a difference at MTYP with a gift of:	
_	<b>3</b> \$250	
Moi	nthly Donation	
	I want to join others by providing ongoing support at MTYP with a <i>mon</i>	thly gift of:
_		
<u>Pay</u>	ment Options	
	Cheque (please make payable to MTYP) □ Credit Card □ Please inv	oice me
Credi	it Card # Expiry	/
Name	e on Card	
Signa	ature	
<u>Dor</u>	nor Tax Receipt Information	
Nam	e or Company	
	e for tax receipt: same as above? □ or	<del>, , , , , , , , , , , , , , , , , , , </del>
	ng Address	
	Province Postal Code	
	ne Email	
1 1101	*Your email will reduce costs, allowing us to focus your donation	
	I would like to be recognized in MTYP donor listings as:	
	I would like to remain anonymous	
	I have left MTYP a gift in my will	
	The gift in my will is in  honour of  memory of :	
	Relationship:	
	<u> </u>	

Thank you for supporting youth in our community with your donation!