



# Marylake

SHRINE OF OUR LADY OF GRACE

## MARYLAKE DONATION FORM

First Name: ..... Initial: ..... Last Name: .....  
Address (Number and Street): .....  
Apt., Unit, P.O. Box #: ..... City: ..... Prov: .....  
Home Phone #: ..... Cell Phone #: .....  
E-Mail: .....

### ONE-TIME DONATION:

Yes, I would like to support Marylake Shrine of Our Lady of Grace with a one-time gift of:

☐ \$1,000   ☐ \$500   ☐ \$250   ☐ \$100   ☐ \$50   ☐ \$ .....

### RECURRING DONATIONS: (please select a schedule)

I would like to donate ☐ weekly ☐ monthly ☐ quarterly ☐ yearly

Amount: \$ .....

☐ I will send Marylake a notice if I decide to stop, or change this recurring payment. 30 day notice required.

### OPTIONAL INFORMATION: (this information is optional)

This gift is ☐ in memory of ☐ in honour of:

.....  
This gift is for (name one of our projects or causes, or anything else you'd like it to be used for):

.....  
☐ I would like this gift to remain anonymous.

## PAYMENT OPTIONS

### CREDIT CARD: (for one-time or recurring donations)

Please charge my credit card: ☐ Visa ☐ MasterCard ☐ Amex

Name as it appears on card: .....

Card Number: .....

Expiry Date: .....

CVV Number: .....

### BANK ACCOUNT: (for one-time or recurring donations)

I authorize Augustinian Fathers (Ont) Inc. to debit my account, the amount of \$ .....

☐ one-time only, or on the ..... day of each ☐ week ☐ month ☐ quarter ☐ year

Please withdraw directly from my bank account: ☐ Savings ☐ Checking

Name of Bank: .....

Transit Number: .....

Institution Number: .....

Account Number: .....

☐ Void cheque enclosed.

☐ I will send Marylake a notice if I decide to stop, or change this recurring payment. 30 day notice required.

### CHEQUE: (for one-time donation)

For one-time donations, you can simply include a cheque with this form.

☐ Cheque enclosed. Please make cheque payable to **Augustinian Fathers (Ont) Inc.**

☐ Please send a tax receipt.

.....  
Donor's Signature

.....  
Date

### SUBMISSION OPTIONS:

E-mail: [info@marylake.com](mailto:info@marylake.com)

Fax: 905-833-5569

Mail: Shrine of Our Lady of Grace at Marylake

13760 Keele St., PO Box 55

King City, ON L7B 1A7

