



**CANADIAN MENTAL HEALTH ASSOCIATION
WINDSOR-ESSEX COUNTY BRANCH**

Charitable Donation Form

When you become a CMHA donor, you help us to enhance and promote the optimal mental health of all person in our community though education, prevention, advocacy, and support services.

CMHA donors... get involved... make a difference... touch lives...

I wish to support the Canadian Mental Health Association in their work of promoting the mental health of all persons in the community by making a charitable donation.

Name:			
Address:			
City:	Province		
Postal Code	Telephone:		
Fax:	Email:		

I have enclosed the following donation of to support the work of the branch:

\$10
 \$20
 \$50
 \$100
 OTHER \$

I would like my donation to go to the following program(s):

- | | |
|---|--|
| <input type="checkbox"/> Case Management/Community Support | <input type="checkbox"/> Breaking Loose |
| <input type="checkbox"/> Employee Assistance Program | <input type="checkbox"/> Bereavement |
| <input type="checkbox"/> Mental Health Program for Older Adults | <input type="checkbox"/> Ombudsmen |
| <input type="checkbox"/> No specific program designation | <input type="checkbox"/> Education |
| <input type="checkbox"/> Volunteer Placement Services | <input type="checkbox"/> Kids Griefworks |
| <input type="checkbox"/> VEP | |

Method of Payment: (Check One)

Cheque payable to: **Canadian Mental Health Association, Windsor - Essex County Branch**

<input type="checkbox"/> VISA	CARD #	Expires:	
<input type="checkbox"/> M / C	CARD#	Expires:	

Signature for Credit Card Payment: _____

Please send a Canadian income tax receipt. Charitable Organization #10686 4036 RR0001

Please mail or fax completed form to
 Canadian Mental Health Association
 Windsor-Essex County Branch
 1400 Windsor Avenue
 Windsor, Ontario N8X 3L9

For more information please contact us:
Phone: (519) 255-7440 **Fax:** (519) 255-7817
Web: www.cmha-wecb.on.ca/donations **Email:** donations@cmha-wecb.on.ca