

## YES, I want to make a donation to Vitanova!

Use this form if your donation will be

- by credit card, with information faxed or e-mailed to Vitanova
- by cheque or money order, and mailed via Canada Post to Vitanova

TITLE	(CIRCLE ONE) MR   MRS   MISS   MS   OTHER (SPECIFY) _____		
FIRST NAME OR COMPANY NAME			
LAST NAME			
STREET			
CITY		E-MAIL	
COUNTRY		POSTAL CODE	
TELEPHONE	HOME	CELL	BUSINESS

CREDIT CARD	CHEQUE	MONEY ORDER
AMOUNT:	AMOUNT:	AMOUNT:
CIRCLE ONE:            VISA    MASTERCARD		
NAME ON CARD:		
CARD NUMBER:		
EXPIRY DATE:		
SECURITY CODE: (3 NUMBERS ON BACK OF CARD)		
<b>IF DONATING BY CREDIT CARD</b> <ul style="list-style-type: none"> <li>• FAX THE COMPLETED FORM TO 905-850-3835, or</li> <li>• SCAN AND EMAIL IT TO <a href="mailto:info@vitanova.ca">info@vitanova.ca</a></li> </ul>	<b>IF DONATING BY CHEQUE OR MONEY ORDER</b> <ul style="list-style-type: none"> <li>• MAIL TO VITANOVA, 6299 Rutherford Road, Vaughan L4H 4X6</li> </ul>	