



## PROVIDE HOPE, OPPORTUNITY and INDEPENDENCE WITH THE GIFT OF MOBILITY

Estimates indicate that 70 million people could use a wheelchair that provides Hope, Critical Mobility, Freedom and Independence. Less than 10% of these individuals have access to a program such as ours that can supply one. Currently \$195 delivers one standard wheelchair, usually in container loads. Donations of \$20 or more are 'Tax Receiptable' by the Canadian Wheelchair Foundation, and will be accumulated to fund the manufacture, shipping and distribution at destination. Your participation is welcome and appreciated. Please complete and submit the form below. Questions: - contact your Council or the Canadian Wheelchair Foundation office.

| ENCLOSED my tax-deductible gift of o\$                                  | 195 • \$390 • Other \$  |   |
|---|---|---|
| DONOR NAME  |   |   |
| Mailing Address   |   |   |
| City Prov   | ince /StatePo   | ostal Code/Zip  |
| Telephone* Er   | mailen me posted on latest news, undates &  | stories of mobility from CWF – I may unsubscribe at any   |
|   |   | State Ontario   |
| WITH THE SPONSORSHIP of each whe a wheelchair recipient and Certificate |   | eceive a Presentation Folder with a photo<br>to receive ONO Thank you Onot applica  |
| PLEASE COMPLETE for the Certificate                                     | of Thanks CANADIAN WH   | HEELCHAIR FOUNDATION wishes to than   |
| □ DONOR NAME (as noted above) / or □                                    | OTHER NAME  |   |
| This donation is made as a Gift $\Box$ in the N                         | ame of $\Box$ in Memory of: $\Box$ in Honor   | our of  |
| ☐ PLEASE MAIL Presentation Folder                                       | (as noted above) / or   |   |
| ☐ PLEASE MAIL to Gift Recipient at to City Prov                         | 7   | ostal / Zip Code  |
|   | ndard wheelchairs   \$21,450 =  | ility aids to countries worldwide are available = <b>20' Container</b> = 110 standard wheelchairs products available and destination countries. |
| Donation with yo  | ur donor name, mailing address, te  | elease provide a note in your email: "For Wheeld<br>elephone number and tax receipt required.") on  |
| ☐ CREDIT CARD: ○ Visa ○ MasterCard ○                                    |   | ard   |
| Card Number   | Expiry Date   | Signature   |
| PLEASE MAKE YOUR CHEQUES PAYABLE TO: MAILING ADDRESS:                   | Canadian Wheelchair Four  | ndation   |
|   | c/o St Agnes KY Tsao Catholic<br>2130 Rodick Road, Markham,<br>Ontario, L6C 1S7<br>Attn: K of C Council 15176 | Church  |

FOR MORE INFORMATION: e-mail: <a href="mailto:info@cdnwheelchair.ca">info@cdnwheelchair.ca</a> call Toll Free (866) 666.2411 or Fax (604) 536.9831 or VISIT OUR WEBSITE: <a href="www.cdnwheelchair.ca">www.cdnwheelchair.ca</a> to learn more, donate, watch videos