



2025 Christmas Program



Please choose the level of support you would like to offer by checking one of the following boxes:

- | | | | |
|--|--|--|---|
| ☐ Family of 1 - \$125 | ☐ Family of 4 - \$200 | ☐ Family of 7 - \$275 | ☐ Family of 10 - \$350 |
| ☐ Family of 2 - \$150 | ☐ Family of 5 - \$225 | ☐ Family of 8 - \$300 | ☐ Family of 11 - \$375 |
| ☐ Family of 3 - \$175 | ☐ Family of 6 - \$250 | ☐ Family of 9 - \$325 | ☐ Family of 12 - \$400 |
| ☐ Other amount \$ _____ | | | |

Method of Payment

- ☐ I have enclosed my cheque payable to the:
Orléans-Cumberland Community Resource Centre
In the AMOUNT of \$ _____

FOR INTERNAL USE ONLY

- ☐ I prefer to use my credit card. ☐ Mastercard ☐ Visa ☐ AMEX
- Card # _____ Exp. Date: ____ / ____ CVV # _____
- Name on the card _____ Signature _____
- Please charge my credit card in the amount of \$ _____

I hereby authorize the Orléans-Cumberland Community Resource Centre to arrange automatic withdrawal from my credit card. Charitable Registration No. 13091 7552 RR0001

Please fill in **ALL** of the following information and please print clearly.

Name/Company Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone No.: _____

Email address: _____

Charitable Receipt Issued to: _____

- ☐ I agree to receive communications via email from the OCCRC.



Please send your donation to:
Orléans-Cumberland CRC
105-240 Centrum Blvd., Orléans, ON K1E 3J4

(613) 830-4357

cchartrand@croc.ca