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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



DONATION/PLEDGE FORM

Please return the completed form to the Office

DONOR	
Name: (First) (Middle) (Last)	Date:
Address:	
Phone:	Email:
PLEDGE INFORMATION	
I would like to donate: ☐ One Time ☐ Monthly Recurring	
☐ \$20 ☐ \$50 ☐ \$100 ☐ \$200 ☐ Other Amount \$	
☐ I am a WIA member -- I authorize WIA to use a portion of my donation to pay for my yearly membership fee.	
PAYMENT INFORMATION	
☐ Make Cheque/ Money Order payable to the <i>Windsor Islamic Association</i>	
<u>Credit Card Payment</u>	
☐ VISA® ☐ MasterCard® ☐ American Express	
Card Number:	Expiry Date (MM/YY):
Name on the Card: (please print clearly)	Signature:
<u>Automatic Bank Withdrawal</u>	
Bank Name: Transit No. Branch No.	
Account No.	
Name on the Account: (please print clearly)	Signature:

The Windsor Islamic Association -- Registered Charity No. 119299949RR0001