

MAIL-IN MONTHLY GIVING Ambassador's Circle FORM



United Nations Association in Canada

Charitable Registration No. 11927-6855 RR0001
www.unac.org

Many of our supporters have asked how they can help the most.
UNA-Canada's "Ambassador's Circle" monthly giving programme is the answer.

Monthly pre-authorized donations are convenient and help reduce costs so your donation goes further.
Even a small amount each month adds up to a significant commitment over the course of a year.

DONOR INFORMATION

Surname _____ Given Name(s) _____

Address _____

City _____ Prov. _____ Postal Code _____

Title (Mr., Mrs., Ms., Dr. etc.) _____ Home Telephone (opt.) (_____) _____

Email (opt.) _____ Work Telephone (opt.) (_____) _____

- I would like to receive occasional (4-8/year) email updates on UNA-Canada activities. *(Please provide email)*
- No, I am not interested in being informed about activities organized in my community. Please do not share my name with the local Branch of UNA-Canada. *(This option only relevant if you live in the vicinity of a Branch)*
- Please do not add me to UNA-Canada's mailing list. I only want to receive the one mailing each year that includes my charitable tax receipt.

UNA-Canada rewards its community-based Branches for finding new supporters. If this is your first gift **and** if you learned about us from a Branch, please indicate which Branch should be acknowledged: _____
(Branch options are: Victoria, Vancouver, Kootenay Region, Edmonton, Calgary, Winnipeg, Toronto, Ottawa/Hull, Hamilton, Quinte Region, Montreal, Saguenay/Lac-St-Jean Region, Quebec, St. John's)

We NEVER trade the names of our monthly givers to other organizations

AUTHORIZATION FOR MONTHLY WITHDRAWAL

I understand that the amount I indicate below will be deducted from my bank account or credit card automatically on the first working day of each month. I know I can alter or cancel this plan at any time by contacting UNA-Canada. A charitable tax receipt for the total amount donated through the Ambassador's Circle programme during any given year will be mailed to me in late January or early February of the following year.

YES, I authorize the United Nations Association in Canada to make monthly withdrawals of:

\$10 \$15 \$20 \$30 I am able to give \$ _____ /month

Signature _____ Today's Date _____

Payment Method

- I have enclosed my blank cheque marked VOID
 - I prefer to use my credit card VISA® MasterCard®
- Card Number _____ Expiry Date _____
Name as it appears on card _____

Please return this form to:

United Nations Association in Canada ♦ 300-309 Cooper Street, Ottawa, ON K2P 0G5 ♦ Fax: (613) 563-2455

Thank you so much for your support!