M	MM	wer	1
$\Lambda$		7 11 / 1 17	
De	ap	over	

For	Office	Use	Only
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Information has been reviewed: YES N
Payment entered into: $\square$ eTap $\square$ CAFT
Today's Date:
Signed off By:

would lil	ke to become a Red Rover Monthly Supporter with my gift of:
\$25 (	\$50 \$100 \$150 Other \$
	ecoming a monthly donor is the best way to ensure that special needs children and adults and their families have an ongoing source of programs and support for years to come.
our gift	their future leave a legacy:
	elp change lives through a legacy gift for Red Roof Retreat. Please send me more ation (fill out the contact information below)
I have	already arranged a gift in my estate for Red Roof Retreat
On	ne of the ways to support Red Roof Retreat is by making a Legacy Donation. A legacy gift to Red Roof Retreat may be pledged today for our immediate use or arranged now for completion at a future time
Payment:	Electronic Funds Transfer (VOID Cheque)
Credi	U Visa Mastercard AMEX  t Card #
	y: CVV# (3 digit on back of card)
	e on Card:
Contact Ir	nformation:
Full N	lame:
Addr	ess:
City:_	Prov Postal Code:
Emai	l:
	e:



1594 Concession Six, RR2, Niagara on the Lake, ON, LOS 1J0 office@redroofretreat.com | 289-868-9800 CHARITABLE REGISTRATION #88759 2285 RR0001