



L'INSTITUT DES CÈDRES CONTRE LE CANCER
 THE CEDARS CANCER INSTITUTE
 2155 Guy Street, Suite 900
 Montreal, Quebec H3H 2R9
 Phone: (514) 843-1606 / Fax: (514) 931-5696

In Honorarium

This gift is in honour of:

Name: _____

Address: _____ Apt: _____

City: _____ Province/State: _____ Postal Code: _____

Correspondence: English French

Donation from:

Name: _____

Address: _____ Apt: _____

City: _____ Province/State: _____ Postal Code: _____

Home: _____ Business: _____

Correspondence: English French I wish to remain anonymous

On the occasion of:

- new baby birthday get well wish anniversary of a transplant
 wedding anniversary other: _____

Personal Message: _____

I would like to make a donation of: \$ _____

I would like my donation to benefit:

- The Cedars Cancer Institute
 Other: _____

Payment method:

- Cheque
 Visa MasterCard Amex

Credit Card: _____ Exp: _____/_____/_____

Signature: _____