



YES! I WANT TO MAKE A TAX-DEDUCTIBLE DONATION TO SUPPORT THE DEVELOPMENT OF CURLING IN SASKATCHEWAN THROUGH THE SPORT LEGACY FUND.

DONOR FORM

I am voluntarily and unconditionally donating the sum of \$ _____ to the National Sport Trust Fund administered by the Canadian Council of Provincial & Territorial Sport Federations Inc. (CCP&TSF), to benefit the development of amateur sport in Canada on a nation-wide basis. I understand that the CCP&TSF can direct my donation to an amateur sport cause of their choice; however my preference is that my gift be used to support the following cause:

- Sport Legacy Fund (general)
- Athlete/Team Development Excellence Fund
- Grassroots Curling/Club Development Fund

Please debit my account monthly in the amount of \$ _____
(\$120 or more per year qualifies for a 20% top up - See below)

Here is my lump sum gift in the amount of \$ _____

Please contact me about other payment options (Credit Cards).

Please contact me about making a planned gift such as life insurance, bequest, gift of listed securities or gift in kind.

For the monthly payment option, please attach a VOID cheque with necessary banking information.

Note: Individual donations of \$120 OR MORE per year are eligible for a 20% top up through the Sport Legacy Fund Donor Incentive Program. To qualify for the donor incentive program your donation must be held in trust for a minimum of 5 years.

Consistent with the income tax interpretations of “qualifying donations”, this contribution is made voluntarily without any conditions and **no benefit will accrue to me (or related parties) as a result of my donation.** I confirm that this donation does not or will not reduce any obligation, directly or indirectly that I (or related parties) have for “non qualifying” expenses such as membership, training, or program registration fees, travel expenses or other like expenses that I would normally be required to pay to the recipient sport organization or any related or affiliated body. **I also understand that civil penalties can be imposed against me for the misrepresentations of tax matters.** Based on these facts, I understand that an official receipt for tax purposes will be issued.

NAME OF DONOR: _____

Address _____

Town/City _____ Postal Code _____

Phone _____

E-mail _____

Signature of Donor: _____ Date: _____

Please make cheques payable to the National Sport Trust Fund. Receipts will be mailed in January. If you would prefer your receipt at the time of donation, please check here _____

Canadian Council of Provincial & Territorial Sport Federations Inc.
 National Sport Trust Fund - Saskatchewan Chapter
 1870 Lorne Street, Regina, SK S4P 2L7