

We invite you to partner through monthly or one-time gifts to our **Development Fund.**



750 Cottonwood Avenue
Kamloops BC V2B 3X2
kamcs.org/giving

DONATION FORM

Name: _____

Address: _____

_____ Postal Code: _____

Phone: _____ Email: _____

DONATION AMOUNT \$ _____

I wish to pay by: **CHEQUE** **CREDIT CARD** **DEBIT**

- In accordance with CRA regulations, Contribution Receipts will be issued for gifts received up to and including December 31 of this year. Please ensure that your contact information is accurate and legible.
- Please refer to our designated giving policy at kamcs.org/giving

Every gift makes a difference!
*Thank you for your investment in our students,
our community, and in God's Story.*

Deborah Hrychiw
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