



\*Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Email: <sup>Personal</sup> \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Employer: McMaster University Employee ID: \_\_\_\_\_

Department: \_\_\_\_\_

- I am retiring this year, please contact me at home
- I would like to receive information about Planned Giving

\*Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_

\*Required Field

**Protecting donor privacy.** The information you provide to United Way Halton & Hamilton may be used to assist in the proper administration and acknowledgment of your gift and to issue tax receipts. United Way Halton & Hamilton does not share its mailing lists.

*United Way Halton & Hamilton is committed to keeping your gift local, by postal code.*

For donor designations see back.

### 1) Payroll Deduction

Leadership Levels: Bronze \$1,200 Silver \$2,500 Gold \$5,000

\$ \_\_\_\_\_ per pay over \_\_\_\_\_ pay periods (24 maximum)

Total Gift \$  Gift renewal:  Annual  Continuous

*\*24 pay period maximum for McMaster United Way donations*

*\*Annual donation will occur for one year only*

*\*Continuous donation will occur year over year until you indicate otherwise*

Leadership Donors may be publicly recognized. I would like to be recognized as: \_\_\_\_\_

Please ensure my gift remains anonymous

### 2) Monthly Giving

*Please complete details on back*

Pre-Authorized Chequing or Credit Card

### 3) One-Time Donation

Cash/Cheque (enclosed)  VISA  Mastercard  AMEX

Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Total Gift: \$

A tax receipt will be automatically issued for non-payroll gifts of \$25 or more. For gifts made through multiple or post dated payments, a year end receipt will be issued. Gifts by payroll deduction are usually recorded on your T4 slips.

Please send an electronic tax receipt

## Monthly Donations

I am authorizing United Way Halton & Hamilton to deduct my monthly donation from my chequing account or credit card beginning in \_\_\_\_\_ (insert month).  
[uwhh.ca/monthly-giving](http://uwhh.ca/monthly-giving)

\*Deductions will begin in January unless otherwise specified.

**Please complete the following:**

Pre-Authorized Chequing, please enclose a VOID cheque

\$ \_\_\_\_\_ per month x 12 = \$ \_\_\_\_\_

Credit Card  VISA  Mastercard  AMEX

\$ \_\_\_\_\_ per month x 12 = \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Donor Designation

Please keep \$ \_\_\_\_\_ of my donation to support the work of United Way Halton & Hamilton

I would like to direct \$ \_\_\_\_\_ to another United Way \_\_\_\_\_

City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

I would like to direct \$ \_\_\_\_\_ to another registered Canadian charity

Charity BN #: \_\_\_\_\_ City: \_\_\_\_\_

Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## Designation Statement

Designated donations must be a minimum of \$20. Gifts designated outside of United Way and supported agencies will be charged a \$12 fee per designation, as per designation policy.

Please release my name to the registered Canadian charity

**Halton Office**  
101 - 4210 South Service Road  
Burlington, ON L7L 4X5

**Hamilton Office**  
177 Rebecca Street  
Hamilton ON, L8R 1B9

1-844-392-7639  
info@uwhh.ca

Charitable Registration Number: 10746 2988 RR0001

[uwhh.ca](http://uwhh.ca)