



1 My Contact Information * Required Field

☐ MS. ☐ MRS. ☐ MR.

FIRST NAME* _____ MIDDLE _____ LAST NAME* _____

HOME ADDRESS* _____ CITY/PROVINCE* _____ POSTAL CODE* _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

HOME EMAIL _____ WORK EMAIL _____

EMPLOYER NAME _____ EMPLOYEE NO. (IF APPLICABLE) _____

UNION (IF APPLICABLE) _____ YEAR OF BIRTH _____

2 Choose to Donate to:

UNITED WAY'S COMMUNITY FUND

☐ **Community Fund** - Your gift supports all three focus areas, helping vulnerable people in our community to thrive.

WHICH FOCUS AREA INTERESTS YOU MOST?

- ☐ **All that Kids Can Be** - Supporting education for children and youth so they can reach their potential.
- ☐ **Strong Communities** - Supporting mental health initiatives and connecting people to their community.
- ☐ **Poverty to Possibility** - Investing in stable housing and ensuring basic needs are met for all.

HOW MUCH DOES YOUR GIFT REALLY COST?

Donation amount	\$1,200.00	\$600.00	\$365.00
Donation per pay period (26)	\$46.15	\$23.08	\$14.04
Actual cost (after tax credits)	\$27.35	\$14.37	\$9.28
**Based on the combined federal and Saskatchewan charitable giving tax credits.			

DONOR RECOGNITION: LEADERSHIP

Your gift of **\$1,200+** distinguishes you as a Leadership Donor in publications. Please print your name as you would like it to appear in published materials:

☐ I wish to remain anonymous

3 My Donation

PAYROLL DEDUCTION Amount per pay \$ _____ X Number of pay periods _____ = \$ _____

(Deductions between January - December)

CREDIT CARD: ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS ☐ ONE-TIME CREDIT CARD GIFT = \$ _____

Card # _____ ☐ MONTHLY CREDIT CARD GIFT = \$ _____

Expiry _____ / _____ CVV _____ JANUARY 15 - DECEMBER 15 \$ _____ X _____ MONTHS

Name on Card _____ ☐ CONTINUOUS GIFT = \$ _____

\$ _____ per month for perpetuity or until I notify United Way

PRE-AUTHORIZED BANK WITHDRAWAL (please attach void cheque)

☐ For 12 consecutive months beginning January 15 = \$ _____

☐ Continuous Gift \$ _____ per month for perpetuity or until I notify United Way = \$ _____

CASH, CHEQUE (payable to United Way of Saskatoon & Area) OR E-TRANSFER

☐ Cash ☐ Cheque ☐ Post-dated Cheque(s) Attached ☐ E-transfer (donate@unitedwaysaskatoon.ca)* = \$ _____

Shares or Securities

Please contact United Way of Saskatoon & Area at 306-975-7700. Information and transfer form is also available on our website: unitedwaysaskatoon.ca/give/planned-giving

*If you choose E-transfer please add your personal info to this form so we can connect you with your donation.

MY TOTAL CONTRIBUTION = \$ _____

TAX RECEIPTS For donations over \$25, tax receipts will be issued by February 28 **via email**, unless specified below. Payroll donations are receipted on box 46 of your T4.

I would like to receive my tax receipt via ☐ Work email ☐ Home email ☐ Mail (If you have selected an email option please ensure it is provided in section 1)

☐ My gift is under \$25 and I would like a tax receipt.

4 More Information

GENNEXT

☐ I would like to learn about United Way's newest initiative for leaders in their 20's and 30's who are passionate about Saskatoon and addressing social and economic issues.

THE TOMORROW FUND Learn more about United Way's endowment fund at unitedwaysaskatoon.ca/give/planned-giving or call 306-975-7700.

- ☐ I have included United Way in my will or please contact me about how to support United Way through my will.
- ☐ I would like to be contacted to explore making a planned gift to achieve my philanthropic goals and wishes.

KEEP IN TOUCH

☐ I would like to learn more about United Way please send me emails about upcoming events and other community initiatives.

5 Sign and Date

Please authorize your donation by signing*: _____ Date*: _____

THANK YOU
FOR DONATING!

100 - 506 25th Street East,
Saskatoon, SK S7K 4A7
office@unitedwaysaskatoon.ca
www.unitedwaysaskatoon.ca

P | 306 - 975 - 7700
F | 306 - 244 - 0583
Charitable Business No.
11927 6509 RR0001

OFFICE USE ONLY
A _____
B _____

Optional Additional Service:

Your gift will automatically be directed to where it is needed most in our community. Should you wish to direct any portion of your gift to another registered Canadian charity, please complete the following:

☐ I wish to leave my gift with United Way \$ _____

☐ Other charities:

Registered Charity Name _____	Charitable Number _____	\$ _____
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Registered Charity Name _____	Charitable Number _____	\$ _____
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The minimum designation is \$25 per organization. Organizations must be registered Canadian charities as per Canada Revenue Agency visit: (https://apps.cra-arc.gc.ca/ebci/hacc/srch/pub/dsplyBscSrch?request_locate=en) United Way does not perform any due diligence on these organizations. In order for us to process your designation, you must provide us with a registered charity number. A processing fee of 15% (to a maximum of \$200 per designation) will be subtracted from each designation to cover the cost associated with processing your designation.

Release my name to the Charity: ☐ Yes ☐ No, I want to remain anonymous

Privacy Protection

We are committed to protecting the privacy and confidentiality of your personal information. The information you provide to United Way of Saskatoon and Area is used to assist in the proper administration and acknowledgement of your gift, to issue tax receipts, and to fulfill your information requests.

For complete details of our Privacy Policy, please visit www.unitedwaysaskatoon.ca/about-us/privacy-policy

United Way does not trade or sell donor information.