

DONATION FORM - Participant Information

First Name:		Last Name:			
Street: Email:		City:	Postal Code:		
			Phone:	ne:	
DONATION INFORMATION Minimum \$10 donation required f		eceipt. Cheques to "Kingston Animal Rescue.	Donation " Amount	Tax Receipt Required	
First Name	Last Name				
Street	City	Postal Code	\$	Yes	
Email				No	
First Name	Last Name			Yes	
Street	City	Postal Code	\$		
Email				No	
First Name	Last Name			Yes	
Street	City	Postal Code	\$		
Email				No	
First Name	Last Name			Yes	
Street	City	Postal Code	\$		
Email				No	
First Name	Last Name			Yes	
Street	City	Postal Code	\$		
Email				No	
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