

DONATION FORM



ONEDROP.ORG



We believe that access to safe water is the most effective and powerful way to ensure sustainable community development worldwide. Thank you for your support, trust, and belief in universal access to safe water.

Donation Amount (\$): _____

DONOR INFORMATION (PLEASE PRINT)

Full Name _____	Tel. (home) _____
Address _____	Tel. (business) _____
City _____	Email _____
State/Province _____	Name(s) to be used in acknowledgements _____
ZIP/Postal code _____	_____

ADDRESS

Please make checks payable to ONE DROP and return to
8400 Avenue du Cirque, Montreal, QC, H1Z 4M6, CA

ONE DROP is a charitable organization registered in Canada, the United Kingdom and the United States. Tax receipts are issued as applicable by law based on the name and address provided.

☐ I wish to have my donation remain anonymous.

☐ I wish to subscribe to ONE DROP's newsletter.

Signature _____ Date _____

THANK YOU!