

DISTRICT OF KATEPWA

TRANS CANADA TRAIL
DONATION FORM

Name of Donor: _____

Address: _____

Postal Code: _____

Phone No. _____

Donation to: (Please check to indicate where the donation should be sent)

Katepwa Beach portion of trail _____

Sandy Beach portion of trail _____

Amount of Donation: \$ _____

Please make cheque payable to: District of Katepwa
Box 250
Lebret SK S0G 2Y0

Please indicate below if this donation is in honour of an individual, special occasion or in memory of someone.

Name

Occasion

All donors will be recognized and charitable tax receipts will be issued. Thank you for your support.