YES, I WILL GIVE TO GRIS !

DONATION

Please fill out this form and return it with your cheque made out to GRIS-Montréal to the following address:

P.O. BOX 476, STATION C, MONTRÉAL, QUÉBEC H2L 4K4

I SUPPORT THE FIGHT AGAINST HOMOPHOBIA BY MAKING A DONATION OF :

○ $20 ○ $50 ○ $100 ○ $250

$ other amount

THANK YOU !

MONTHLY DONATION
ON THE 15TH OF EACH MONTH, I WILL GIVE:

○ $10 ○ $15 ○ $20 $ other amount

I enclose a specimen cheque marked "VOID" so GRIS-Montréal can make pre-authorized withdrawals from my bank account.

Signature :

Email :

Full Name :
Address :
City :
Postal Code :

You can modify or cancel your monthly contribution at any time by advising us at **info@gris.ca**.

I wish to receive news from GRIS-Montréal.

○ Yes ○ No

By email ○ By mail ○

You can also donate by credit card by clicking on "Make a Donation" at : **http://www.gris.ca/english/#donation**