

I'm going to #Donate150for150

Name _____

Address _____

City | Province | Postal Code: _____

Phone _____ Email _____

TOTAL PLEDGE \$ _____

I hereby pledge and agree to contribute the amount noted above in support of the Langley Hospice Society's Supportive Program Centre as part of their **#150for150** Campaign to help ensure access to quality, client-centred grief support programs & services for the children, teens, adults and families they serve. My gift will be paid in the following manner:

\$ _____ as a one time gift \$ _____ monthly FOR 12 Months

\$ _____ monthly FOR ___ Months.

Signature _____ Date _____

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