Group you are supporting: _____
(organization)

Name _____ Email _____
(Please provide your email for essential informational updates.)

Address *_____ Phone (with area code) _____

City _____Province_____Postal Code _____ * Where you want your cards mailed to.

To calculate the amount of your cards/certificates order, multiply your weekly purchases by 4. Example: If you spend $125 per week on groceries, you would order $500 in Eat to Give ™ cards/certificates for the month. If you spend $75 a week on gas you would order $300 in Gas Up to Give™ cards/certificates for the month. After writing in the amount to be debited, choose the number and denomination of cards/certificates you would like to receive.

Amount to be Debited _____**(Minimum order $250 in groceries cards/certificates required *excluding* Costco and gas cards.)**

EAT TO GIVE™

❑Central†	$10x_____ $25x_____ $50x_____
❑Food Basics†	$10x_____ $25x_____ $50x_____
❑Foodland†	$10x_____ $25x_____ $50x_____
❑Loblaws*	$25x_____ $50x_____ $100x_____ $250x_____ (Loblaws, Zehrs, No Frills, Value Mart, Fortinos, Your Independent Grocer, Extra Foods, The Real Canadian Superstore & Wholesale Clubs, Maxi & Co, Provigo, Atlantic Superstore, SaveEasy & Super Value)
❑Longos*	$20x_____ $50x_____
❑Metro*	$25x_____ $50x_____ $100x_____ (Metro, A&P, Dominion, Loeb, Ultra Food/Drug, The Barn)
❑ M & M's*	$25x_____ $50x_____ $100x_____
❑Sobey's*	$25x_____ $50x_____ $100x_____ $250x_____ (Sobeys, Price Chopper, IGA, Knechtels, Foodland, Town, Omni, Boni Choix, Tradition, Commissio's)
❑Tim Horton's*	$10x_____ $25x_____ $50x_____
❑Costco*	$50x_____$100x_____ $250x_____ (note: no membership required)

GAS UP TO GIVE™

❑Canadian Tire*	$25x_____ $50x_____ $100x_____ (Gas and Store)
❑Esso*	$25x_____ $50x_____ $100x_____
❑Petro Canada*	$25x_____ $50x_____ $100x_____
❑Pioneer*	$25x_____ $50x_____ $100x_____
❑Shell/Turbo/Beaver†	$20x_____
❑Sunoco*	$20x_____ $50x_____ $100x_____

Note: * Declining balance card † Gift certificate
Please note that up to $5.00 cash back given at time of check out for certificates. If this is a concern please order small denominations.

PAP from Bank Account Option

❑ Enclose a VOID cheque, **or** fill in the following information.

Name of Financial Institution: _____Branch address: _____

Branch number: __|__|__|__|__| (five digits) Institution number: __|__|__| (three digits) Account number: __|__|__|__|__|__|__|__|__|__|__|__|__| (maximum of twelve digits)

Withdraw Funds For

- ❑ Full amount on 1st of month
- ❑ 1/2 of amount on 1st and 15th of month
- ❑ Weekly (1st, 8th, 15th, 22nd) (Minimum order of $400 for this payment option)

I/we the undersigned authorize Community Charity Services to debit my/our account at the Financial Institution indicated. Under the terms and conditions agreed by me/us with Community Charity Services until such time as written notice to the contrary is given by me/us to CCS.
Please Note: You can change the details of your PAP with 30 days e-mailed/written notice from the date of your first monthly withdrawal.

Registration Forms can be mailed or faxed. Email: service@charityservices.ca Website: www.charityservices.ca
Mailing Address: CCS, 25 Industrial Drive, Elmira ON N3B 3K3 Phone: 1-519-669-1081 or 1-866-669-2276 Fax: 1-519-669-2573

I/we have read and understood the terms and conditions and hereby accept them as a condition of my/our participation in PAP.

_____ _____
Signature Date

Credit Card Option (*Minimum order of $500 in groceries is required for this payment option)*

Name:_____

Address: _____ City: _____ Postal Code: _____

❑ Visa or ❑ MasterCard Card number: |__|__|__|__| - |__|__|__|__| - |__|__|__|__| - |__|__|__|__|

Expiry date: (month __|__| (year) __|__| Name on card: _____

I/we have read and understood the terms and conditions and hereby accept them as a condition of my/our participation in credit card payment.

_____ _____
Signature Date

Post Dated Cheque Option

❑ 12 post dated cheques enclosed. Date cheques for 1st of month.

Order must be received by 20th of month to be set up for following month.

Note: Your cards/certificates will be mailed to you on the 2nd of each month. Canada Post's mailing standard is 4 business days - not including your mailing day, week-ends, or holidays. Your cards may be delivered up to 7 days after your mailing day (CCS is not responsible for any delays as delivery is handled by Canada Post. If cards are lost or stolen in transit CCS will replace them. Please note that once the cards are in your possession they must be treated like cash. Cards cannot be replaced once you have received them).