



La Leche League Canada

To encourage, promote and provide mother-to-mother breastfeeding support and educational opportunities as an important contribution to the health of children, families and society.

✓ I am pleased to support breastfeeding mothers!

La Leche League Canada (LLLC) protects the personal information you voluntarily provide. This information allows us to keep you informed of LLLC services, special events and funding needs. LLLC does not lend, rent, sell or trade our mailing lists. If at any time you wish to be removed from any of these contacts, please advise our Privacy Officer by mail, at 613-774-4900, or adc@llc.ca.

I am pleased to support breastfeeding mothers with my gift of:

\$ _____ Thank you!

My gift of \$50 or more is in honour of: in memory of:
(Please PRINT the full name of the person you are honouring or remembering)

 \$1000 Patron \$500 Benefactor \$150 Sustainer
 Cheque VISA/MC Monthly (over)

Credit Card # _____

Expiry Date _____ Signature _____

Tax receipts are issued automatically for donations of \$10 or more.

Thank you for your valued support!

Please make cheques payable to La Leche League Canada.

Charitable Registration Number: 11900 3812 RR0002

I would like to participate in your monthly giving program.

I authorize a monthly charge of \$100 \$75 \$50 \$25 \$15 Other _____

Please complete the front of this reply card with your credit card information or include your postdated cheques. You may cancel or change your monthly donation at any time by informing La Leche League Canada.

Start Date (month) _____ End Date (month and year) _____



La Leche League Canada thanks you for your generosity