



Pregnancy Care Centre

TRUST • COMPASSION • CARING

*Together we can make
a difference!*

(Please print)

Name _____

Address _____

City _____

Postal Code _____

Phone _____

Church _____

E-Mail _____

DONATION DESIGNATED TO:

North York Scarborough General

METHOD OF DONATION:

Cash \$ _____

Cheque \$ _____ (payable to the Pregnancy Care Centre)

Donations are tax-receipted at year end.

- Please send me your quarterly newsletter
- I am interested in serving as a volunteer
- Please send your Prayer Support e-mail

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Charitable Status Number: 10778 6683 RR0001