Tax Receipt Form

Please submit all forms and donations to your coach in a ***sealed envelope or ziplock bag***.

Cheques can be made out to ***Erie Shores Health Foundation.***

Receipts will be issued by the Erie Shores Health Foundation for donations of ***$20 and over***.

|  |  |  |  |
| --- | --- | --- | --- |
| Players Name | Phone Number | Team/Division/Colour | Coach |

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Phone Number | Mailing Address | Donation Amount |
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Thank you for your support!

  