



Canadian Youth Drugs Free Project Sponsorship Form

Sponsorship Name: _____

(Please check the following options)

- Donation of your choice
 - Donate an amount of your interest to support our project in general
- Support our meals
 - Donate an amount to support one of our meals
 - Breakfast: estimated \$ 100
 - Lunch: estimated \$ 200
 - Dinner: estimated \$ 300
 - OR, you may choose to provide us a meal of any value
- Get us around:
 - Donate an amount to support our transportation around Vancouver
 - Vans: estimated \$ 3200 in total
 - Gas: estimated \$ 500 in total
 - OR, you may choose to drive the group around to their events

Sponsor amount: _____

Contact Information:

Address: _____

Telephone: _____

e-mail: _____

Receipt upon requested and send by e-mail, receipt is non-taxable receipt