



ST JOHN'S COLLEGE

University of Manitoba
92 Dysart Road
Winnipeg, MB R3T 2M5
Ph (204) 474-9350
Fax: (204) 474-7610

**Never underestimate the difference YOU make
in the lives of our students!**

Donation Form

Name: _____

Address: _____

City: _____ Province/State: _____ Postal Code: _____

Ph: _____ Email:(optional) _____

☐ Cheque – please make payable to St John's College

☐ Credit Card: Card Number: _____ Expiry Date: ____/____

Last 3 digits on back of credit card (optional) ____ _

Cardholder Name: _____ Signature _____

My Gift of \$ _____ is to be used for: (For more opportunities please contact the office.)

☐ Residence Renewal

☐ Chaplaincy Endowment

☐ Canadian Studies Endowment

☐ Theological Endowment

☐ Unrestricted-Where needed most

☐ SJC Chapel

☐ Bursary/Scholarship (Name) _____

Gift in Memory or in Honour of:

Here is my gift of \$ _____

☐ In Memory of _____

☐ In Honour of _____

Thank you for your generous gift.

A receipt for income tax purposes will be sent directly. Charitable Number: 11918 0495 RR0001

We acknowledge our donors in our *In Lumine* publication once a year. Let us know if you do not wish to be acknowledged: ☐ I wish to remain anonymous

St John's College - Fostering a rich and well-rounded educational experience