

I would like to support the

WINKLER ARTS + CULTURE CENTRE

PERSONAL INFO

Name _____

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Postal Code _____

DONATION

Donation Amount _____

One Time Monthly Quarterly Annually

PAYMENT METHOD

Cheque* Visa Mastercard

**Make cheques payable to Winkler Arts + Culture*

Credit Card # _____

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Postal Code _____ Date _____

Cardholders Name _____

Signature _____



547 Park Street, Winkler, MB

Tax receipts will be issued for donations \$20 and up