



Confirmation of Support

Name:

Address:

Email:

Phone Number:

I _____ would like to become a Supporter of the Social Planning Council of Cambridge and North Dumfries. Enclosed is my voluntary contribution of:

- \$35.00 (Individual)
- \$75.00 (Organization)
- \$100.00 (Corporate)

I would like to be added to the SPCCND mailing list to receive newsletters, communiques, event invitations and information from our community partners.