



Alberta SPCA  
17904 118 Ave NW  
Edmonton AB T5S 2W3  
Phone: (780) 732-3746  
Fax: (780) 447-4748  
albertaspca.org

## Alberta SPCA ART Donation Form

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**ART Monthly Donor Program:**      \_\_\_\_\$20      \_\_\_\_\$30      \_\_\_\_\$50      Other \$\_\_\_\_\_

I authorize the Alberta SPCA to deduct \$\_\_\_\_\_ from my bank account or credit card on the first day of each month or the next business day. I understand that I can change or cancel this monthly donation at any time, subject to providing written notice of 15 days or more. *To view a sample cancellation form or learn more about cancelling a PAD agreement, contact your financial institution or visit [cdnpay.ca](http://cdnpay.ca). You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with the PAD agreement. For more information on your recourse rights, contact your financial institution or visit [cdnpay.ca](http://cdnpay.ca).*

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Payment Information:

☐ Bank Account (I am enclosing a VOID cheque)

☐ Credit Card    ☐     ☐ 

Card # \_\_\_\_\_ Expiry Date \_\_\_\_ / \_\_\_\_

Cardholder Name \_\_\_\_\_

Fax: 780-447-4748

Phone: 780-732-3746

Email: [donorrelations@albertaspca.org](mailto:donorrelations@albertaspca.org)

Mail: Alberta SPCA, 17904 118 Ave NW, Edmonton AB T5S 2W3