



## Stream of Dreams Murals Society Donation/Membership Form

- I want to be a member of the Society for only \$10 a year.
- Yes, I want to be a Stream of Dreams Murals Society Monthly Donor to help protect Earth's irreplaceable waterways. My full monthly donation is tax deductible.
- \$25/month  \$15/month  \$10/month  \$\_\_\_\_ Other/month

I authorize the Stream of Dreams Murals Society to withdraw the amount indicated above:

- from my Chequing account each month commencing \_\_\_/\_\_\_/\_\_\_ (m/d/y).  
(Please enclose a personal cheque marked .VOID. for bank verification.)
- from my credit card each month commencing \_\_\_/\_\_\_/\_\_\_ (m/d/y).
- Visa  MasterCard  Exp. \_\_\_/\_\_\_

Signature \_\_\_\_\_

(You may cancel at any time by contacting the Stream of Dreams Murals Society)

Privacy Statement: The Stream of Dreams Murals Society does not share its membership information with any other organization or company. Tax receipts are issued once a year.

**OR**

- I want to be a member of the Society for only \$10 a year.
- Yes, I want to help support Stream of Dreams eco-education.

Here is my tax deductible gift:

- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> \$1000 Watershed | <input type="checkbox"/> \$ 500 River |
| <input type="checkbox"/> \$100 Stream     | <input type="checkbox"/> \$ 50 Creek  |
| <input type="checkbox"/> \$25 Dreamfish   | <input type="checkbox"/> \$____ Other |

(Tax receipts issued for gifts of \$20 or more) Total Enclosed \$ \_\_\_\_\_

I wish to pay by:  Visa  MasterCard  Cheque

Card No. \_\_\_\_\_ Exp. \_\_\_/\_\_\_

Mr.  Mrs.  Ms.  Miss  Dr. Signature \_\_\_\_\_

Name \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_\_

Postal Code \_\_\_\_\_ Email \_\_\_\_\_

Mail to: Stream of Dreams Murals Society (Charitable Tax No. 879473809 RR0001)

182-5489 Byrne Rd. Burnaby, BC V5J 3J1

Tel: 604.434-4304 Web: [www.streamofdreams.org](http://www.streamofdreams.org)

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