

Response Form

**I am pleased to be a part of this important campaign.
I would like to support Mennonite Heritage Village in the following ways:**

Current Donation Enclosed: _____

Pledges: Date _____ Amount _____

Date _____ Amount _____

Date _____ Amount _____

Credit Card VISA Mastercard

Card Number _____ Expiry Date _____

Signature _____

May we include your name in the published donor list? Yes No

Donations may be made on-line at www.mhv.ca

Name _____

Address _____

City _____ Postal Code _____

Country _____ Phone # _____

Email _____

