



Physicians *for* a Smoke-free Canada

1226A Wellington St. ♦ Ottawa, ON ♦ K1Y 3A1 ♦ ☎:1-613 233-4878 ♦ 📠:1-613 233-7797
psc@smoke-free.ca ♦ www.smoke-free.ca

Physicians for a Smoke-free Canada is proud to be associated with
AIRSPACE Action on Smoking and Health...and the

JOURNEY for a TOBACCO-FREE WORLD

DONATION FORM

Please **PRINT** clearly:

Name: _____
Street Address: _____
City and Prov/State: _____
Postal/Zip Code: _____
Phone: area code _____ number _____ - _____
E-Mail: _____

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> \$20 | <input type="checkbox"/> \$100 |
| <input type="checkbox"/> \$50 | <input type="checkbox"/> \$200 |
| <input type="checkbox"/> Other | |

Paid by Cheque VISA# _____ Exp: _____

NOTE: If paying by cheque, please make your cheque payable to "Physicians for a Smoke-free Canada"...and print "**AIRSPACE/JTFW**" **in the memo line**. Thank you!

For more info about this project, please visit: www.tobaccofreeworld.ca

Fax to 613 233 7797

or mail to

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