



ANCOP INTERNATIONAL (CANADA) INC.
Transforming Communities, Changing Lives.

**CHILD SPONSORSHIP
PROGRAM FORM (CSP)**

FULL NAME (PLEASE PRINT)		<input type="checkbox"/> GROUP <input type="checkbox"/> INDIVIDUAL	
ADDRESS: NO. AND STREET			
CITY	PROVINCE/STATE	COUNTRY	POSTAL CODE
HOME PHONE	CELL PHONE	WORK PHONE	OTHER PHONES
EMAIL ADDRESS			
SOLICITED BY (GROUP, CHAPTER or ASSOCIATION NAME)			
TAX RECEIPT REQUESTED <input type="checkbox"/> YES <input type="checkbox"/> NO		PREFERRED CHILD NAME/PROJECT (MUST BE A PROJECT APPROVED BY ANCOP CANADA)	

I WOULD LIKE TO BE AN ANCOP PARTNER AND PARTICIPATE UNDER THE CHILD SPONSORSHIP PROGRAM BY CONTRIBUTING:

\$384.00 (Cost of 1 year for one (1) Child see Note 1 below) \$768.00 (Full share in a post secondary scholar sponsorship) Other Amount _____

I WOULD LIKE TO PAY FOR THE ABOVE (PLEASE SELECT APPROPRIATE BOX)

One time payment of the above amount Monthly Installment of \$ _____ per month for _____ months starting _____

MANNER OF PAYMENT

CASH AND/OR CHEQUES PAYABLE TO ANCOP INTERNATIONAL (CANADA) INC.
 CREDIT CARD VISA AMEX MASTER CARD (MINIMUM OF \$32 PER CHARGING, PLEASE)

NAME ON CREDIT CARD:

CREDIT CARD NO:

EXPIRY DATE:

PRE-AUTHORIZED PAYMENT (PAP). PLEASE ENCLOSE A VOIDED OR CANCELLED CHEQUE. (PHOTOCOPIES ARE NOT ACCEPTABLE.)

I understand that if the donation shall exceed the requirements or local situations prevent program implementation, Ancop will redirect funds to similar programs to achieve its purposes. I also acknowledge the notes below about tax receipts and GK housing unit prices.

Signature: _____ Date: _____

Registration No 87935 0312 RR0001

DONATIONS OF \$20 OR MORE WILL BE ISSUED OFFICIAL TAX RECEIPTS AS REQUESTED AFTER THE END OF THE YEAR. INFORMATION GATHERED ABOVE SHALL BE USED FOR THE EXCLUSIVE PURPOSES OF ANCOP INTERNATIONAL (CANADA), INC. AND WILL NOT BE DISTRIBUTED OR SOLD. (NOTE 1: Price of sponsoring a child is subject to change without prior notice as the controlling currency and oil price factors are beyond Ancop control. If the pledge is on a installment basis, AICI reserves the right to request for additional donation if warranted and the donor may elect to increase or not his installments. If the donor elect not to increase the installment to the new price, the whole donation shall be towards a share of a whole unit after the full payment is received.)

MAIL to: ANCOP INTERNATIONAL (CANADA) INC. P.O. BOX 98067 SOUTH COMMON MALL
2150 Burnhamthorpe Rd. West, Mississauga, Ontario, Canada L5L 5V4

(OR to the mailing address of the
(Ancop Area office nearest to your address.
(See Page 2 of this form.)

OFFICE USE ONLY
