

Contribute to the Green Party of Canada

Contribution amount

Monthly contributions can be made by credit card or automatic bank withdrawal.

Monthly \$10 \$20 \$50 \$100
Other amount: _____

One time \$10 \$100 \$400 \$1775
Other amount: _____

Local Donation (optional)
EDA/Candidate Name: _____

After processing your donation to the Green Party of Canada, an amount equal to your contribution less a processing fee will be transferred to the federal Electoral District Association (EDA) or candidate in your riding. If there is no EDA or candidate, the funds may be used for general campaign activities of the Green Party of Canada.

Become a member (optional)

Receive updates, organize locally, have a voice and a vote in the Green Party of Canada.

I apply for membership in the GPC. I promise to abide by Constitution, policies and principles of the GPC, I state that I am not a member of another federal political party.

One year party membership
Contribute a minimum of \$10

Three year party membership
Contribute a minimum of \$25

Payment method

Cheque
Made out to the Green Party of Canada Fund

Automatic bank withdrawal
Enclose a voided cheque; the amount you indicate will be automatically withdrawn from your chequing account every month.

Credit card
Please charge my contribution to my credit card:

Number: _____

Exp: / / Security code:
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Tax Credits

Here's some examples of the tax credits you can receive

Contribution	Tax Credit	Your Actual Cost
\$10	\$7.50	\$2.50
\$25	\$18.75	\$6.25
\$50	\$37.50	\$12.50
\$100	\$75	\$25
\$200	\$150	\$50
\$400	\$300	\$100
\$600	\$400	\$200
\$1000	\$558	\$442
\$1775	\$650	\$1100

First Name: _____ Last Name: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

I, the undersigned, authorize the above contribution to the Green Party of Canada (GPC). I certify that I am a Canadian citizen or permanent resident of Canada. I am making this contribution with my own personal funds and not with a business account or on behalf of another person. No individual or organization will either partially or fully reimburse me.

Signature: _____ Date: _____

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