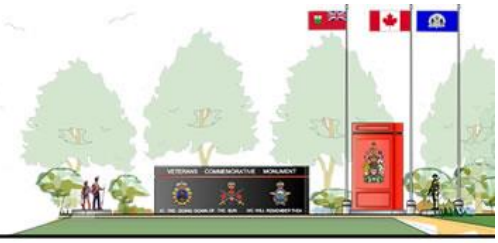
Veterans Commemorative Monument

They Served With Honour For Our Freedom



I am proud to support the Veterans Commemorative Monument project

Donor Information:

Name: _____
Address: _____
City: _____ Postal Code: _____
Phone Number: _____ E-Mail: _____

Gift Options

☐ I would like to purchase one or more commemorative brick (s).

____ brick(s) x $150 per brick Total: $_____

☐ I wish to support the Veteran's Commemorative Monument project with my one-time gift of $ _____

Recognition: I wish to honour the following veteran:

Name: _____
(please print)
Unit: _____ Date of Service: _____:
□ Army, □ Navy, □ Air Force □ RCMP □ Police (having served in peacekeeping duties)

For additional honouree information, please attached a separate sheet with your payment.

Payment Options

Credit Card: □ Visa □ Master Card

Card Number: _____ Expiry: _____

Name on Card: _____ Signature: _____

☐ Cheque (please make payable to) "**Remembrance Fund**"

☐ Please check here if you do not wish to be recognized for your donation

Thank you for your support!
Please return your donation to:
Clyde Healey
Veterans Commemorative Monument
P.O. Box 20042
150 Churchill Blvd
Sault Ste. Marie, ON P6A 6W3