



Yes, I want to help women create a brighter future for themselves and their children!

Name: _____

Address: _____

E-mail: _____ Phone: _____ Fax: _____

- \$ 50.00 – one woman will participate in an 8 week Building Self Esteem program
- \$100.00 – provides a workshop for 12 women on women's health issues
- \$150.00 – two volunteers will be trained as one-to-one mentors for women in transition
- \$500.00 – provides counseling support for one woman for a six month period
- other \$ _____

Enclosed is my cheque for \$ _____ payable to Scarborough Women's Centre.

Visa or MasterCard # _____ Expiry date _____

Signature _____

- Please send me information about membership in the Centre.
- Yes, you may acknowledge my donation in your newsletter and website.

**Scarborough Women's Centre is a non-profit charitable organization # 10795 9660 RR0001
Your donation is tax deductible. Thank you so much!**