



Ontario
REALTORS Care®
Foundation

Ontario REALTORS Care® Foundation Fellowship Form

YES, I want to become an Ontario REALTORS Care® Foundation Fellow or recognize someone as a Fellow.

Purchaser Name:

Company/Board:

Street:

City, Province:

Phone:

Postal Code:

Email:

If you are purchasing the Fellow for someone other than yourself:

- I would like to name _____ as a Fellow
and make a \$1,000 donation to the Fellowship program.

Fellow Email Address:

Fellow Mailing Address:

- I wish to remain anonymous. The Fellow will not know who donated on their behalf.

Method of Payment:

- Credit Card** Payment Type VISA Master Card

Credit Card#:

Expiry: Validation Code:

Cardholder Name:

Cardholder Signature:

- Cheque** (payable to Ontario REALTORS Care Foundation)

- Interac e-Transfer** Auto deposit service. Pay ORCF by directing the payment to
AccountsReceivable@orcf.ca.

Payment **by EFT:**

Full legal business name: (name on bank account)	ONTARIO REALTORS CARE FOUNDATION
Bank Name:	ROYAL BANK OF CANADA
Bank Address:	2514 BAYVIEW AVE NORTH YORK ON M2L 1A9
Institution Number:	003
Transit Number:	00610
Account Number:	1000900
Email for notification:	AccountsReivable@orcf.ca

ORCF Charitable Registration No.11906 8286 RR0001

Please return to: Ontario REALTORS Care® Foundation, 15 Kern Road, Toronto, ON M3B 1S9 or email to lavinam@orcf.ca. Thank you for supporting the Foundation.

Deadline for Submission: January 19, 2024