



PAYMENT FORM - Jam with a Past President

Please complete this form and return by email to lavinam@orcf.ca

Jam Ticket - \$35 x = Total _____

Guest Name(s): _____

Company Name: _____

Contact Name & Title: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Payment Options:

- 1. **Credit Card** Payment Type: [] Visa [] MasterCard

Credit Card#: _____ Expiry: _____ Validation Code: _____

Cardholder Name: _____ Cardholder Signature: _____

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

- 3. **EFT** - Transfer details below.

Full legal business name: <small>(name on bank account)</small>	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:	AccountsReceivable@orcf.ca