



Make the Assist

Let's Hit the Goal Together

PLEASE ACCEPT MY DONATION:

☐ \$50 ☐ \$100 ☐ \$200 ☐ \$500

☐ My Choice \$ _____

☐ CHEQUE (payable to the “Nova Scotia Sport Hall of Fame”)

☐ CREDIT CARD:

Name on Card:

Card Number:

Expiry: _____ CVV: _____

☐ Please contact me to discuss planned giving

☐ Please contact me to discuss Capital Campaign

My name can be published in the Hall of Fame annual program and on the website as a friend of the Hall ☐ Yes ☐ No

Donate by:

- *Mailing this card in the enclosed envelope*
- *Calling (902) 404-3321*
- *Scanning the QR code to donate online*



All donations will be followed with a tax receipt.

