

Luz del Rosario Supporter Form
Trustee for English Separate School Board
Wards 6 & 11

1470 Edenrose Street
Mississauga, Ontario L5V 1H5
(905) 542-8747 (416) 726-7614
e-mail: info@luzdelrosario.ca

Name: _____

Address: _____

Home phone: _____ Bus. Phone: _____

Cell No. : _____ e-mail address: _____

DONATION:

Donation Amount: \$ _____ (Receipts will be mailed)
(You may donate up to \$750.00 per individual or company)

Please make cheques payable to:

Luz del Rosario Election Campaign

Mailing address: 1470 Edenrose Street, Mississauga, Ontario L5V 1H5

CAMPAIGN SUPPORT:

Lawn Sign	Large	Yes []	No []
	Small	Yes []	No []

Volunteer Roles (please check all that apply)

<input type="checkbox"/> Fundraising	<input type="checkbox"/> Lawn Sign Crew
<input type="checkbox"/> Telephoning	<input type="checkbox"/> Food/Snack Supplier
<input type="checkbox"/> Door to Door Canvassing	<input type="checkbox"/> Door to Door Delivery
<input type="checkbox"/> Election Day Team	<input type="checkbox"/> Scrutineer
<input type="checkbox"/> Driver	<input type="checkbox"/> Other: _____

Day & Times Available To Help

Monday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening
Tuesday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening
Wednesday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening
Thursday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening
Friday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening
Saturday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening
Sunday	<input type="checkbox"/> A.M.	<input type="checkbox"/> P.M.	<input type="checkbox"/> Evening

Thank you for your support!