## The Montréal Cavalry Institute Information sheet

| Name   | and address   |   |                 |                                  |                       |                         |                             |
|--|---|---|-----------------|----------------------------------|-----------------------|-------------------------|-----------------------------|
| Name   |   |   |                 |                                  |                       |                         |                             |
| Rank: Current or last  |   |   |                 |                                  |                       |                         |                             |
| Address  | Number, Street and apartment  |   |                 |                                  |                       |                         |                             |
|  | City  |   |                 |                                  |                       |                         |                             |
|  | Province  |   |                 |                                  |                       |                         |                             |
|  | Postal code   |   |                 |                                  |                       |                         |                             |
| History with the unit or the Armed Forces (if applicable)  |   |   |                 |                                  |                       |                         |                             |
| email add  | ress  |   |                 |                                  |                       |                         |                             |
|  | Tick your choice  | I authorize the Institute to communicate with me via e-mail Please de not contact me via e-mail |                 |                                  |                       |                         |                             |
| Signature  |   |   |                 |                                  |                       |                         |                             |
|  |   | 1   |                 |                                  |                       |                         |                             |
| Details of donation and allocation, if applicable  |   |   |                 |                                  |                       | \$                      |                             |
| General donation (allocated by board to highest priorities of the Institute)   |   |   |                 |                                  |                       |                         |                             |
| Please donate a minimum of \$50 to this category  Membership, if you are a member of the Institute (50\$ in 2018, 2019 and 2020) |   |   |                 |                                  |                       |                         |                             |
| Specific Specific  |   |   |                 |                                  |                       |                         |                             |
| causes<br>(indicate  | es  |   |                 |                                  |                       |                         |                             |
| each cause,<br>if applicable   | n cause,  |   |                 |                                  |                       |                         |                             |
| 3  |   |   |                 |                                  |                       |                         |                             |
| 12   |   |   |                 |                                  |                       |                         |                             |
| Total amount of Donation   |   |   |                 |                                  |                       |                         |                             |
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Please address your cheque to **The Montréal Cavalry Institute**, and send it to the Institute's correspondence address: Care of Steven Barrette, Corporate Secretary, 652 ave. Westluke, Cote St-Luc, Quebec, H4X 1P7

Please do not forget to indicate your choice regarding email communications and to sign your form.