

# MUSALLAH CAMPAIGN 2008

## Build Your Future One Musallah at a Time

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_ Country: \_\_\_\_\_

Day Phone: (        ) \_\_\_\_\_ Cell Phone: (        ) \_\_\_\_\_

Email: \_\_\_\_\_ Signature: \_\_\_\_\_

### 1. DONATION

Donation of: \$ \_\_\_\_\_

Cash     Cheque     Bank Transfer  
 Certified/Money Order

Credit Card # \_\_\_\_\_ Expiry: \_\_\_\_/\_\_\_\_

Name on Card: \_\_\_\_\_ Type: Visa / Mastercard

### 2. MONTHLY WITHDRAWAL

Monthly Donation: \$50/month or other amount: \$ \_\_\_\_\_/month **(Attach a Void Cheque)**

Beginning : \_\_\_\_/\_\_\_\_/\_\_\_\_ Ending: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                  MM    DD    YEAR                    MM    DD    YEAR

### 3. MUSALLAH INFO

I would like to purchase [check amount of Musallahs]:  1  2  3  Other: \_\_\_\_\_

Name you would like Musallah dedicated to and mounted on Musallah Plaque (Max 2):

Name (Musallah) 1: \_\_\_\_\_

Name (Musallah) 2: \_\_\_\_\_

Name (Musallah) 3: \_\_\_\_\_

\*You may make one lump sum payment or choose the monthly withdrawal plan to pay for the above **specific purpose**.



All cheques/bank transfers to:

Name of Beneficiary's Bank:

Branch Address:

Bank Transit #:

Account #:

Swift Code:

**The Council of Islamic Guidance, Inc.**

Royal Bank of Canada

111 Grangeway Ave., Scarborough, ON

CANADA M1H 3E9

05752 - 0003

100 870 5

ROYCCAT2

*A non-profit organization, Registration No. 11922 8815 RR0001*

**Mail to: The Council of Islamic Guidance, Inc.**

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