## Rosh Hashanah 5784 Order Form

Place your order today to send best wishes to your family and friends, while supporting Sinai Health.

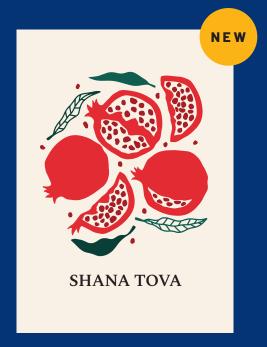
To ensure that your cards are received before Rosh Hashanah begins on September 15, 2023, all orders must be placed by September 11.

If you have any questions, please call 416-586-8203 or email foundation@ sinaihealthfoundation.ca.

Please indicate your card of choice:



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## **BILLING INFORMATION**

Name:			
Address:			
City/Province:			Postal code:
Telephone:			Email:
Payment method: VISA	mastercard.	AMERICAN EXPRESS	Cheque enclosed (Payable to Sinai Health Foundation)
Card number:			Expiry date:
ORDER INFORMATION			
Total number of cards in my orde	er:		
Minimum donation per card:		x \$10.00	
Subtotal:	\$		
Optional Top-up donation:	+\$		
Total enclosed:	\$		
Proceeds will support Sinai Hea	lth's highest priorit	y needs, or plea	ase direct my donation to:

Please submit this completed form by email to foundation@sinaihealthfoundation.ca, or print it out and mail to Sinai Health Foundation at 1001–522 University Avenue, Toronto, Ontario M5G 1W7.



foundation@sinaihealthfoundation.ca

**TOLL FREE** 1-877-565-8555

**T** 416-586-8203 **F** 416-586-8639

Charitable Registration No. 119048106 RR001

SUPPORTSINAI.CA

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