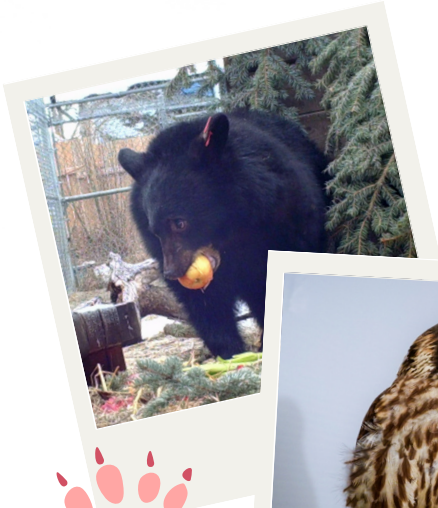


♥ Sponsor a Patient ♥



Show your love for a specific wildlife patient by supporting their care and learning their story on the road to recovery!



ALBERTA INSTITUTE
FOR WILDLIFE
CONSERVATION

I would like to give....

Cash Donation: \$ _____

Sponsor a Patient: Support the care of a wild animal recovering at AIWC.

Great Horned Owl American Kestrel: Western Grebe:
 American Black Bear Pine Grosbeak Bohemian Waxwing:
 Other species: _____

Choose the amount you would like to donate in honour of this animal:

\$25 \$40 \$60 \$100 \$150

If you would like more info, to see a selection of the animals that we currently have in care, or to order online for faster delivery, please visit www.aiwc.shop

2024 AIWC Calendar:

AIWC member price: \$18.00, including shipping. I would like _____ calendar(s)

Member number: _____

Non-member price: \$20.00, including shipping. I would like _____ calendar(s)

AIWC Membership (Renew early for 2024-2025):

Individual Membership: \$35/year Family Membership: \$45/year

Total: \$ _____

Please return orders as soon as possible or give us a call at 403-946-2361 to place your order over the phone. There can be delays with Canada Post shipments in November and December and we want to ensure you receive your selections as soon as possible.

Order online: All of these options, and more, are available to purchase online. Visit our secure, online store at www.aiwc.shop for faster ordering and shipping. Thank you for your support!

Donor's name: _____

Address: _____ City: _____

Phone: _____ Province: _____ Postal code: _____

Email address: _____

Card number: _____ Expiry: _____

Method of payment (circle one:) VISA / MasterCard / Cheque (payable to AIWC)

Please check box if you'd like AIWC to keep your credit card on file in our secure accounting system.

*For gifts, please include recipient's name and address with your returned form.

** Tax receipts are issued for donations of \$15.00 or more (excluding membership and merchandise).

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