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PPPC Scholarships - 2018 Sponsor Form

SPONSOR INFORMATION

Name of Main Contact: _____

Company: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ E-Mail _____

SCHOLARSHIP INFORMATION

Award my scholarship(s) in the name of (\$1,500 minimum donation required for named award):

Amount of Donation: _____

Allocate my funds to the areas where it is most needed

Allocate my funds to the following field(s) of study:

Choice #1: _____ Choice # 2 _____

Allocate my funds in the following province(s):

Choice #1: _____ Choice # 2 _____

I plan to make a yearly commitment to the program for _____ years.

My contribution to this year's Scholarship program is \$ _____

METHOD OF PAYMENT

Cheque enclosed

Please make your cheque payable to PPPC

Charge the amount of \$ _____ to my VISA MASTERCARD AMEX

Name of Cardholder: _____

Card No: _____ Exp: _____

Signature: _____ Date: _____

Thank you for your contribution to the PPPC Scholarship Program.