



Request Form



Please Print

Charity Name: _____ Date: _____

Charitable Registration #: _____ Contact Name: _____

Contact Phone #: _____ Contact E mail: _____

Charity Location: _____

Important: The complete charity name and corresponding charitable registration number must be given for this nomination to be considered. For further conditions, please see guidelines at the bottom of this form.

Amount Requested: _____

Donation will be used to: _____

Please provide a brief description of the charity: _____

*Please print and return completed forms to Kathy Blackmore at:
Gore Mutual, P.O. Box 70, 252 Dundas Street, Cambridge, ON N1R 5T3*

Gore Mutual Foundation Mission Statement

To support the communities served by Gore Mutual Insurance Company by aiding and supporting social services, education, health, culture and environmental activities as may be in the best interest of these communities.

Funds will generally not be considered: to provide endowment funds; for sectarian, religious or political purposes; to organizations that are substantially government funded or directed, except hospitals and educational facilities; to individuals; for sports events; to national organizations whose local organizations receive grants from the Foundation; for projects outside the communities we are supporting and specifically outside the provinces where Gore Mutual Insurance Company does business; to organizations that use grant funds to support other registered charitable organizations (except for the United Way and hospital foundations); for goodwill advertising; to fund conferences and seminars.

