

THE YOU CAN CAMPAIGN Enrollment Form

Name of Can Holder	
Address	
City	
Postal Code	
Phone (Day)	
Phone (Evening)	
Email	
Volunteer Recruiter	Hospice
Recruiter's Phone #	905-664-4652
Can Number Assigned	
Date Assigned	
Date Returned	
Amount	
Counted by	
Verified by	
Receipt	Yes _____ No _____

Please call your volunteer recruiter when your can is ready to be returned. Alternatively, please call the Dr. Bob Kemp Hospice at 905-664-4652.

Arrangements can be made to pick up your can at a convenient time.

Thank you for becoming part of Dr. Bob's Family. You are making a difference.