

**TO:**

**Friends of the Toronto Chapter of the  
Thyroid Foundation of Canada  
Lawrence Plaza Postal Outlet,  
P.O. Box 5406 I,  
Toronto, ON M6A 3B7**

**INFO Line: 416-398-6184  
www.thyroidlink-Toronto.ca**

**Enclosed is my contribution of \$\_\_\_\_\_**  
Please make cheque payable to Toronto Chapter, Thyroid Foundation of  
Canada.

**I wish to receive 14 health guides on thyroid disease by regular  
post for a suggested minimum donation of \$10.00 . This  
includes the booklet, *Common Concerns of Thyroid Patients* by  
the late Dr. Robert Volpe, OC, MD, FRCPC, MACP, a noted  
thyroid specialist.**

**My address is:**

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**To save on postage and handling I wish to receive the 14 health  
guides on thyroid disease by e-mail.**

**Yes \_\_\_ my e-mail address is**

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In addition a password will be sent by e-mail to allow access to a  
protected online folder containing the 14 health guides. Additional  
materials will be added as they become available

**I will only require the password protected online folder.**

**Yes \_\_\_ my e-mail address is**

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