



## 2023 Pre-Order Form

**From May 1 - 7**, our Restaurant Owners will be supporting more than 500 charities, hospitals and community programs across Canada.

**Guests who purchase a freshly baked Smile Cookie for \$1.50 plus tax will be donating 100% of their purchase to the Dawson Creek and District Hospital Foundation!**

To pre-order Tim Hortons Smile Cookies, complete this form and submit it to the Dawson Creek and District Hospital Foundation by email to [dcdhfoundation@northernhealth.ca](mailto:dcdhfoundation@northernhealth.ca).

Please specify pick-up location or if you would like them delivered to your business by the Hospital Foundation. You can also visit the Tim Hortons app or Skip the Dishes to see if your Smile Cookies can be delivered.

**Number of Cookies:** \_\_\_\_\_ **OR** **Number of Dozen:** \_\_\_\_\_  
NO GST on Amounts over 6 cookies

**ARE YOU PURCHASING SMILE COOKIES FOR ANOTHER ORGANIZATION, BUSINESS OR SCHOOL?**

**IF SO, PLEASE TELL US WHO:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Circle one:**

**Delivery or Pick Up**

**DELIVERY DATE:** \_\_\_\_\_ **Delivery Time:** \_\_\_\_\_

**OR** **Please allow one-hour delivery window**

**PICK UP DATE:** \_\_\_\_\_ **Pick up Time:** \_\_\_\_\_

**Pick up Location:**

**Tim Hortons, 8th Street, Dawson Creek**

**Tim Hortons, Alaska Highway, Dawson Creek**

**Tumbler Ridge**

**PLEASE COMPLETE PAYMENT ON THE NEXT PAGE.**



## 2023 Pre-Order Form

### PAYMENT INFORMATION

Payment type:

Credit Card

EFT

( PLEASE SEND E-TRANSFER TO [DAWSONCREEKTIMS@GMAIL.COM](mailto:DAWSONCREEKTIMS@GMAIL.COM) PASSWORD: **COOKIE** )  
WITH YOUR ORDER NAME IN THE COMMENTS

Cash on Pickup

### Credit Card Information

\_\_\_\_\_

Credit Card Number

\_\_\_\_\_

Expiration Date

\_\_\_\_\_

CVV

\_\_\_\_\_

Name on Card

\_\_\_\_\_

Email address for receipt

### **PLEASE CONFIRM YOUR ORDER**

Number of Cookies: \_\_\_\_\_ OR Number of Dozen: \_\_\_\_\_  
NO GST on Amounts over 6 cookies

Your Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

**ARE YOU PURCHASING SMILE COOKIES FOR ANOTHER ORGANIZATION,  
BUSINESS OR SCHOOL?**

IF SO, PLEASE TELL US WHO: \_\_\_\_\_