DONATION PAGE. PLEASE FILL IN, TEAR OFF AND MAIL BACK TO US...

YOUR DETAILS

Title:	Mr	Mrs	Ms	Miss	Dr	Other:
First Name:						Surname:
Address:						
						Post Code:
Telephone: (Home)						Telephone (Work)
Mobile:						Email:

DONATIONS (Your donation over $2 is tax deductible)

One off Donation

$50.00 ❑ $100.00 ❑ $250.00 ❑ $500.00 ❑ $ My Choice ❑

❑ **Cheque** (payable to Parkerville Children and Youth Care) ❑ **Credit Card** (Please complete Details Below)

1st Fold

REGULAR GIVING REQUEST

To make a regular donation via direct debit or credit card, please complete the details below:

I wish to donate $ per month

Commencing 1st (first) day of (Month) (Year)

Last Donation1st (first) day of (Month) (Year)

(Please leave blank if donations are to continue indefinitely)

PAYMENT INSTRUCTIONS

Direct Debit

I/We request Parkerville Children and Youth Care (Inc) to arrange for funds to be debited from my/our nominated account at the financial institution shown below.

Name and Branch of Institution:

BSB No: Account No:

Signature: Date:

2nd Fold

OR

Credit Card

Name on Card:

Visa ❑ Mastercard ❑

Card Number: / / / Expiry Date: /

Signature: Date:

Did you know… you can now **make donations online** using our secure website?
Please visit **www.parkerville.org.au**

PRIVACY POLICY

Please visit our website for our Privacy Policy.