

FAX BACK CREDIT CARD DONATION FORM AND MAIL CHEQUE DONATION FORM



To make a Credit Card donation to The Victor Chang Cardiac Research Institute simply fill out the following form and send to:

Fax Credit Card Donations only to: (02) 9295 8601

Mail Credit Card and Cheque donations to: PO Box 699, Darlinghurst NSW 2010

Please fill out the following information—a receipt for your donated will be posted to you.

Full Name and Address details:

Mr Mrs Ms Miss Other ..

Surname:

First Name:

Mailing Address:

Suburb/Town:Postcode.....

Phone numbers (Please provide at last two contact numbers)

Home: Work: Mobile:

Type of Credit Card

Mastercard Visa Diners American Express

Account No:

Name on Card: Expiry Date:

Amount: \$..... Signature:

Please direct my donation to:

In Memory:
(please supply name of person & name and address of next of kin)

General Donation:

Fundraiser:
(please name event)

In Celebration:
(please advise name and address of person)

Research Project:
(please advise which project)

Automatic Deductions (credit card only)

If you would like to regularly donate to the VCCRI from the nominated account, please indicate so by ticking the field and nominating an appropriate time period between deductions (eg monthly, quarterly, yearly)

YES, I would like to donate regularly, to the VCCRI, for the amount of \$
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Fax to: 02 9295 8601

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