

THE SALVATION ARMY AUSTRALIAN EASTERN TERRITORY DONATION FORM

Please accept my gift of: \$ _____ Date: _____

Donation to:

- Red Shield Appeal Christmas Appeal
 Disaster Relief Other (please specify) _____

Please select your frequency of payment:

- One-off
 Monthly
 Quarterly
 Annually

Please select your method of payment:

- Money Order
 My cheque is enclosed marked 'Not Negotiable' and payable to 'The Salvation Army'
 Please debit my bank account

Account Name _____

BSB _____

A/C No. _____

- Please debit my credit card:
Select Mastercard Visa Amex Diners

Credit card Number: _ _ _ _ _ / _ _ _ _ _ / _ _ _ _ _ / _ _ _ _ _

Name on credit card: _____

Expiry Date: _ _ _ / _ _ _

Signed: _____

Surname: _____

First name: _____

Address: _____

Suburb/Town: _____

State: _____ Postcode: _____

Telephone: (____) _____

Fax: (____) _____

Mobile: _____

Email: _____

Thank you for your generosity in supporting The Salvation Army. A receipt will be posted to you when your donation has been processed. If you have any enquiries about donations, contact us on 13 72 58 or via email on donations@ae.salvationarmy.org

Mail: GPO Box 9888 in either Sydney or Brisbane	Fax: NSW (02) 9266 9805 QLD (07) 3229 6996
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