



DONATION SLIP:

Please accept my donation to HeartKids West Australia

Please make cheques / money orders payable to HeartKids West Australia Inc.

Name: _____ Organisation: _____

Amount donated: \$_____ Form of payment (Please circle): Cash, Cheque, Money Order, Credit Card.

Card Type: _____ Card Number: ____ / ____ / ____ / ____ Exp Date: ____ / ____

Name on Card: _____

Address: _____

State: _____ Postcode: _____

ONGOING SUPPORT:

Please automatically debit my credit card: Monthly/Quarterly/Yearly

For the amount of: \$_____

I hereby authorise HeartKids to deduct these funds from my account until further notice:

Signature: _____

Date: _____

Please post form to:

HeartKids West Australia Inc

Mail: PO Box 1554,
West Perth WA 6872

Fax :(08) 9340 7997

Email: fran.maunton@heartkids.org.au