



Donation Form – Cubes for Kids Project

Cheque / Money Order:

Enclosed is cheque / money order for \$ _____

Direct Payment: (please return this form advising us of your donation, use your surname followed by Cb as the reference)

NAB – BSB No: 082 167 Account No: 834566764

Credit Card:

Mastercard Visa Amex

Cardholders Name: _____

Cardholders Signature: _____

Card Number: ____ / ____ / ____ / ____ Expiry ____ / ____

My receipt should be made out to: _____

Address: _____

Phone Number: _____ Mobile: _____

Email: _____

Donations of \$2 or more are Tax Deductible.

Please forward your completed Donation Form by post of fax to

Lifestart Co-operative Ltd
PO Box 3277
Putney 2112

Fax: (02) 9807 9600

I wish to receive information on future Lifestart events
(please tick if you wish to receive information on Lifestart events (email only))

ABN 43 073 450 316

CFN 15767 (Certified Fundraising Number)

DGR 444769 (Deductible Gift Recipient)

THANK YOU FOR YOUR SUPPORT