

DONATION FORM

PERSONAL INFORMATION **PLEASE USE CAPITALS** First Name : _____ Last Name : Title : ______ /____ /_____ /________ State: Address: Post Code: Suburb: Phone Number: Is this donation on behalf of a No **Yes** If yes, please specify: business or organisation? **DONATION DETAILS** Donation Amount: \$ Transfer Date (for direct deposit) _____/___/ **DONATING FOR - OPTIONAL** Specific fundraising event Which event? Unspecified **Support Program** Which Program? **Emergency Utility Funding Family Holiday Time Out for Life Camp Diversional Therapy** Grant a child's wish **Educational Support** Other **Emergency Travel & Accommodation** Albury/Wodonga Griffith Dubbo Unspecified **Support Region** Wagga Wagga **PAYMENT INSTRUCTIONS Email:** Paying by direct deposit **Paying by Cheque** admin@countryhope.com.au Direct deposit funds into bank account Make cheque payable to:

Direct deposit funds into bank account using the following details and post or email this completed form:

Bank Beyond Bank 325 185 Account Number 038 490 53 Account Name Country Hope

Account Name Country Hope Trust
Reference Donation < YOUR NAME>

Country Hope Trust

Attach the cheque to this completed form and send in the post.

Postal Address:

Country Hope PO Box 134 WAGGA WAGGA NSW 2650