



TO START A MONTHLY DONATION,
please complete your details below... thank you for helping us save lives!

▶ **STEP 1 YOUR CONTACT DETAILS**

Title: _____ First Name: _____ Surname: _____
Mailing Address: _____ Suburb: _____
State: _____ Postcode: _____ Phone/Mobile: _____
Email: _____

▶ **STEP 2 YOUR SUPPORT**

I would like to donate: Monthly
My donation is: \$5 \$10 \$20 My choice \$
I would like to donate by: Credit Card Debit Bank Account

Credit Card Details

Card Number:
Card Expiry Date: / CVC Number (three numbers displayed on back of card):
Cardholder Name: _____

Bank Account Details

Account Name: _____ Bank Name: _____
BSB: Account Number:

▶ **STEP 3 JUST 2 MORE MINUTES OF YOUR TIME?**

I donate because:

I have been a patient on the Rescue Helicopter Because I like knowing it could be there for me one day
 I know someone who has been flown by the Rescue Helicopter Other: _____

I would like more information about becoming a Helicopter volunteer: Yes No
I would like more information about how to leave a gift in my Will to the Rescue Helicopter Yes No

▶ **STEP 4 MAKE YOUR SUPPORT COUNT**

- Post your form to PO Box 230, NEW LAMBTON NSW 2305
- Email scan your form to donations@rescuehelicopter.com.au

THANK YOU FOR YOUR TIME AND SUPPORT