CONTRIBUTION FORM

PERSONAL DETAILS

Name ____________________________________________ Phone ____________________________

Street Address __________________________________________

Suburb ____________________________________________ State ________ Postcode _________

Email Address __________________________________________

Student Surname (if applicable and different from above)

______________________________________________

MY CONTRIBUTION Please accept my tax-deductible donation of $ ________________

PAYMENT OPTIONS

☐ DONATE ONLINE

☐ CHEQUE as a tax-deductible donation (Please write cheques out to Inaburra School Building Fund).

☐ CREDIT CARD as a tax-deductible donation.

☐ CREDIT CARD as recurring deductions as follows:
  Monthly contributions over 12 months of $ ________________ per month.
  Monthly contributions over 24 months of $ ________________ per month.

☐ Mastercard    ☐ Visa

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Name on card ____________________________________________

Expiry Date _____/____ CVV Code ☐☐☐☐ ☐☐☐☐  Signature________________________________________

Your details are protected by the Inaburra Privacy policy. This policy can be found on the school website.

Please send this form and address it to:

Inaburra Building Fund
Inaburra School
PO Box 3066 BANGOR NSW 2234

Inaburra School Building Fund
ABN 49 249 773 201