

# heart OF GOLD



## STEP 1 I / WE WOULD LIKE TO JOIN HEART OF GOLD REGULAR GIVING PROGRAM, BY DONATING:

\$10    \$25    \$50    \$100    Your Choice \$ \_\_\_\_\_

## STEP 2 I / WE WOULD LIKE TO GIVE THIS AMOUNT:

Weekly    Monthly    Quarterly    Yearly

## STEP 3 MY / OUR CONTACT INFORMATION:

Mr    Mrs    Miss    Ms    Other \_\_\_\_\_

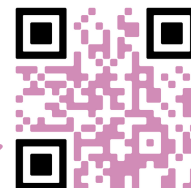
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Organisation Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_



YOU CAN ALSO JOIN ONLINE BY SCANNING HERE!

## STEP 4 MY / OUR PAYMENT DETAILS:

Method of payment Please charge my:  Mastercard    Visa

Card Number               Expiry Date   /   CVV

Name on card	Signature
--------------	-----------

OR  Enclosed is my cheque payable to Catherine House Inc  
 Enclosed is my cash donation

All donations \$2 and over are tax deductible

I would like to learn more about leaving a lasting gift to Catherine House in my will

I have already included a gift in my will

If you have selected the above, you will be contacted directly by Catherine House

Please return this form to PO Box 6031 Halifax Street Adelaide SA 5000 or email to: [reception@catherinehouse.org.au](mailto:reception@catherinehouse.org.au)

THANK YOU FOR YOUR KINDNESS.

