



## Yes, I would like to give kids a chance by making a **donation** today

### my details

title \_\_\_\_\_ first name(s)\* \_\_\_\_\_

surname\* \_\_\_\_\_

organisation (if applicable) \_\_\_\_\_

street address\* \_\_\_\_\_

suburb\* \_\_\_\_\_ state\* \_\_\_\_\_ pcode\* \_\_\_\_\_

tel\* \_\_\_\_\_ mob\* \_\_\_\_\_

email\* \_\_\_\_\_ dob / / \_\_\_\_\_

\* required for tax receipting

### my donation

please accept my donation today of \$ \_\_\_\_\_

I enclose my cheque/money order (payable to Perth Children's Hospital Foundation)

or

please debit my credit card:      

card number \_\_\_\_\_

cardholder's name \_\_\_\_\_ expiry date \_\_\_\_\_

signature \_\_\_\_\_

### please send this completed donation form to:

PO Box 8249  
Subiaco East WA 6008

### OR scan this completed form and email to:

admin@pchf.org.au

### contact us:

**t** (08) 6456 5550

**e** admin@pchf.org.au

**w** pchf.org.au

- Please send me information about leaving a bequest to the Foundation.
- Please contact me to set up a regular donation via direct debit/credit.
- Please keep me updated on how my support is helping, along with Perth Children's Hospital Foundation activities by email, post and/or telephone.

By ticking this box, you will receive information about how your support is giving kids a chance, along with other opportunities to get involved in Perth Children's Hospital Foundation events, campaigns and activities. You can access our full Privacy Policy at pchf.org.au or by calling us on (08) 6456 5550.