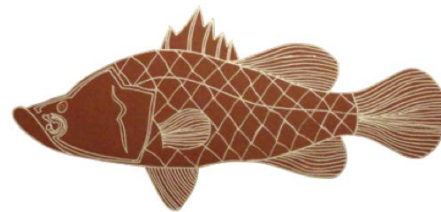


Donation Form



Thank you for joining in partnership with the Foundation for Indigenous Sustainable Health as we work together to give people a hand up not a hand out.

"Healthy spirit, heart, mind and body,
healthy families, community and land"

Details

Title: _____ First Name: _____ Last Name: _____

Address: _____ Suburb: _____

State: _____ Post code: _____ Email: _____

Donation

I would like to make a one off donation of \$_____ to
Foundation for Indigenous Sustainable Health.

I would like to make an ongoing monthly credit card payment of:

☐ \$25 ☐ \$50 ☐ \$75 ☐ \$100 ☐ other (min \$15)_____

Methods of payment:

EFT: BSB 086-006 Account Number 12-620-6485
(Please use last name as reference and state donation)

Cheque payable to: "Foundation for Indigenous Sustainable Health"

Credit card payment: ☐ Visa ☐ MasterCard

Card number: _____

Card holder name: _____

Expiry date: ____/____ CSV: _____

Please post to:

FISH Fundraising
PO Box 7741
Cloisters Square WA 6850

Or email: fundraising@fish.asn.au

Signature: _____

Donations of \$2 or more are tax deductible

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