# Thank you for becoming a regular donor. Please indicate your payment method and details for your regular donations.

Title : _____ Name : _____ Surname: _____

Email:_____ Mobile: _____

Telephone (H):_____ Telephone (W):_____

* Company name and position if applicable: _____

Address:_____

Suburb: _____ Postcode: _____ State: _____

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☐ Option 1 - Tick to indicate Direct Debit (If you would like to make contributions via direct debit from your bank account please read the enclosed service agreement).

Name of account _____

Financial institution name _____

Address _____

BSB number ☐☐☐-☐☐☐ Account number ☐☐☐☐☐☐☐☐☐

I request and authorise Barnardos Australia to debit the specified amount through the 'Bulk Electronic Clearing System' from the account held at the financial institution identified above, subject to the terms and conditions of the Direct Debit Request Service Agreement and any further instructions provided. By signing (below) this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and Barnardos Australia as set out in this Request and in your Direct Debit Request Service Agreement.

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☐ Option 2 - If you prefer to use your Credit Card please complete the details below.

Visa ☐ Mastercard ☐ Amex ☐ Diners ☐ Name on Card: _____

Card number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry Date:___ /___

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☐ Please set my frequency to: Monthly ☐ Quarterly ☐ Half-Yearly ☐ Yearly ☐

☐ I would like to REGULARLY donate the amount of:

$250 ☐ $150 ☐ $75 ☐ $30 ☐ My choice $ _____

☐ Individual Receipt or ☐ Corporate Receipt (*Complete above)

☐ First debit to take place on 19/___/2010.

Signature _____

Please mail your completed form to:
**GPO Box 9996, SYDNEY NSW 2001** or
Fax to: **(02) 9281 0526**

www.barnardos.org.au 1800 061 000

Barnardos
We *believe in* CHILDREN

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