

DONATION REPORT AND DEPOSIT SLIP

NAME OF GOLF CLUB: (please use capital letters to complete form)

ADDRESS OF GOLF CLUB:

STATE: **POSTCODE:**

NAME & TITLE OF CONTACT PERSON:

DATE AND TYPE OF EVENT:

NUMBER OF PARTICIPANTS:

DONATION AMOUNT:

METHOD OF PAYMENT:

\$

EFT CHEQUE CREDIT CARD

BANKING DETAILS TO DEPOSIT DONATION:

Name of Account: Legacy Australia Inc **Remembrance Golf Day**

Account BSB: 063019

Account number: 10797679

Note: It is essential you quote your Golf Club name with payment to assist with reconciling reports and payments.

Alternatively Clubs can make a credit card donation to Remembrance Golf Day for Legacy:



Credit Card number:

Exp. Date:Month /Year **Name on Card:**

Or, send cheque payable to: **Remembrance Golf Day for Legacy** to:
Legacy Australia PO Box 267, Miranda, NSW 1490

NOTE:

Please mail, fax or email this card and payment no later than November 30, 2013

Mailing address:

Legacy Australia, PO Box 267, Miranda NSW 1490

Fax: (02)8543 2199

Email: marketing@legacy.com.au

Enquiries to:

Frances Crampton AM, Executive Officer

Email: remembrance@legacy.com.au

<http://www.legacy.com.au/remembrancegolf/getinvolved>

Phone: 0418 615 337.

THANK YOU FOR YOUR SUPPORT



REMEMBRANCE
GOLF DAY
- FOR LEGACY -