

ANZSA thanks you for your support. You are funding stillbirth research, the improvement of clinical practice as well as programs that increase awareness of stillbirth. Together we can reduce the rate of stillbirth in Australia and New Zealand. Thank you for creating change with us.

## Personal Details:

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Postcode: \_\_\_\_\_ State: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

☐ I do not wish to be on the ANZSA mailing list

## I would like to donate:

☐ \$100      ☐ \$50      ☐ \$20      ☐ Other \_\_\_\_\_

## Payment Details:

I would like to pay by:

☐ Cheque

(Payable to: *The Australian and New Zealand Stillbirth Alliance Ltd*)

☐ Money Order

☐ Credit-card

☐ Visa

☐ Mastercard

Card Number: \_\_\_\_\_

Cardholders Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

☐ EFT

**Account Name:** The Australian and New Zealand Stillbirth Alliance Ltd

**Bank:** ANZ

**BSB:** 014278

**Account Number:** 8356 12048

**Customer Reference:** Your full name

## Optional

I would like to donate to ANZSA in remembrance of \_\_\_\_\_  
 \_\_\_\_\_ who was born on \_\_\_\_\_

☐ I would like to commemorate this baby on the ANZSA website

### Please return to:

**ANZSA Secretariat**  
**Level 2, Quarters Building**  
**Annerley Road**  
**Woolloongabba**  
**QLD 4102**

Or

**Fax to: (07) 3163 1588**