

## Tweddle Giving Tree Donation and engraving order form

Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Postal address (for receipt) \_\_\_\_\_

I would like to donate the following tax deductible amount to Tweddle Child and Family Health Service.

I would like to donate \$20 to the Tweddle Child and Family Health Service.

Please acknowledge my donation with a gold leaf on the Tweddle Giving Tree and engrave the leaf with the following **first name OR first and family name**.

\_\_\_\_\_  
**PLEASE USE BLOCK LETTERS**—up to 26 letters

\_\_\_\_\_  
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\_\_\_\_\_  
**PLEASE USE BLOCK LETTERS**—up to 26 letters

Please deduct the total of \$ \_\_\_\_ from my credit card

### Donation

I would like to make a donation to Tweddle Child and Family Health Service to support their programs

### Please make payment by the following means:

I authorise Tweddle Child and Family Health Service to deduct \$ \_\_\_\_\_ from my credit card:

Mastercard / Visa Card                      Expiry Date: \_\_\_\_ / \_\_\_\_

Card number: \_\_\_\_\_

**Funds transfer to Tweddle Child and Family Health Service**

BSB: 063-248                      Account number: 10219099

Amount: \$ \_\_\_\_\_                      Reference: \_\_\_\_\_

Give Now—Make a donation via the secure 'Give Now' portal at [www.givenow.com.au/tweddle](http://www.givenow.com.au/tweddle)