



Donation to Easter Appeal 2009

Please find enclosed my donation of \$

Title: Mr / Mrs / Ms / Dr (please circle)

Name: _____ (please print in block letters)

Address: _____

_____ Pcode _____

Preferred Phone No: _____ Email: _____

Payment Method: Cheque Cash Credit Card
(please tick)

Receipt Required? Yes / No

If you prefer to pay on-line, we are accepting credit card donations via the "Donate Now" button on the website: www.lornecommunityhospital.com.au which links to a secure online giving station

Do you wish to be informed of upcoming fundraising activities? **Yes / No**

Donations can be made in person at the Hospital Administration during normal office hours, or mailed to:

Janelle Bryce
Chief Executive Officer
Lorne Community Hospital
Albert Street
Lorne Vic 3232

If paying by cheque, please make the cheque payable to "Lorne Community Hospital".

If paying by credit card, phone through the details on **03 5289 4300**, or complete details below and either send to the above address or fax to 03 5289 2313.

Credit Card: Visa Mastercard (please tick)

□□□□ □□□□ □□□□ □□□□

Expiry Date: □□ / □□

CCV No: □□□ (Credit Card Verification (CCV) – the last 3 numbers on the signature strip on the back of your Credit Card)

Name on Credit Card: _____

Signature: _____

If a regular monthly direct debit is preferred, please call the Administration Officer on 52894311 to arrange this.

Thankyou for your support