

Yes! I want to support the chaplain at _____ School.

Here is my gift:

\$ _____

This is a ☐ Regular monthly gift ☐ One-time gift

Donations of \$2 and over are tax-deductible and a tax receipt will be posted to you. Regular monthly supporters will receive one receipt at the end of each financial year.

Please provide a tax receipt in

☐ My name ☐ My company name

☐ **Please send me information on remembering SU QLD in my will.**

Please return to:

**SU QLD, PO Box 1167
Eagle Farm QLD 4009**

You can also donate online at
suqld.org.au/donate
or by phoning **1300 478 753**

☐ **Credit Card** ☐ Visa ☐ Mastercard ☐ Diners ☐ American Express

CARDHOLDER'S NAME _____

CARD NUMBER _____

EXPIRY DATE ____ / ____ SIGNATURE _____

☐ **Direct Debit** (regular supporters only)

Bank _____ Account Name _____

BSB _____ Account Number _____

Drawings are made on the third Thursday of the month. If debiting from a joint account, both signatures are required. I / We the undersigned request you, Scripture Union Queensland (ID 057485), to arrange for funds to be debited from my / our nominated account at the financial institution nominated above according to the schedule specified herein.

Signature(s) _____

☐ **Cheque** (For one-time gifts only. Made payable to SU QLD Schools Ministry Fund.)

My details (Your personal information is treated in accordance with SU QLD's privacy policy — visit suqld.org.au/privacy)

TITLE _____ NAME _____

COMPANY _____

ADDRESS _____

SUBURB _____ POST CODE _____

PREFERRED PHONE ☐ HOME ☐ WORK ☐ MOBILE _____

EMAIL _____