



**The Australian Rotary Foundation Trust
of The Rotary Foundation of Rotary
International**

I wish to donate to The Rotary Foundation of Rotary International through **The Australian Rotary Foundation Trust**
Designation: Annual Programs Fund PolioPlus

First name..... Last Name.....

Home Address.....

State Post Code..... Tel Mobile

E-mail address.....

Rotary Club of..... District

Rotary International Membership Number.....(Available from your Club Secretary)

PAYMENT DETAILS AMOUNT in Australian currency \$ _____

Cheque

Direct Debit

By signing this document, I/We authorise: THE AUSTRALIAN ROTARY FOUNDATION TRUST with ABN 55 218 421 934 and with Debit User Number 352263 the Debit User, to debit my/our account, detailed in the Schedule below, through the Direct Debit System. I/we must pay you when due under the arrangement between us. This authority is to remain in force until further notice.

BSB _ _ _ _ _ Account Number _____

NAME ON ACCOUNT: _____

NAME OF FINANCIAL INSTITUTION: _____

Frequency Preferred Calendar Date _____

Once only Monthly Quarterly Half Yearly Yearly

SIGNATURE: Date:/...../.....

Credit Card MASTERCARD VISA

Name on Card _____

Card No _____/_____/_____/_____ EXPIRY DATE:/.....

SIGNATURE: Date:/...../.....

Frequency Preferred Calendar Date _____

Once only Monthly Quarterly Half Yearly Yearly

Please return completed form by fax 02 96893169 or to P.O. Box 1415, Parramatta NSW 2124.

**If your district is part of the Centurion or Paul Harris Society initiative, please forward to your District Foundation
Co-ordinator in the first instance.**

DONATIONS OVER \$2.00 ARE TAX DEDUCTIBLE- see Direct Debit Service Agreement overleaf