



I wish to make a gift to Ipswich Hospice Care

Please return this form by mail to:

Ipswich Hospice Care Inc
37 Chermside Road
Eastern Heights QLD 4305
Australia

Or by fax to: (07) 3812 0232

Gift amount \$

In memory of *(optional)*

My Name _____

Address _____

City _____

State _____

Postcode _____

Phone _____

Email _____

Enclosed is my cheque, money order or draft

Payable to:

Ipswich Hospice Care Inc

My credit card details are below

Card Number:

____ / ____ / ____ / ____

Card Expiry:

____ / ____ VISA / MASTERCARD

Name on Card:

Cardholder Signature:

I have sent a bank transfer to

Bank:

Heritage Building Society

Account Name:

Ipswich Hospice Care Inc

Account Number:

11475765

BSB:

638-070

*Donations to Ipswich Hospice Care of \$2 and over are tax deductible for Australian residents.
We will send you a tax receipt by return mail.*