LIFE MEMBER 2022/23 FINANCIAL YEAR

Donation Form

A fillable version of this form is available on our website www.hfv.org.au.or you can access the form using the QR code. Please return completed forms to HFV via post or email, Thank you!

Mr / Mrs / Ms / Miss / Dr / Other :	
First Name:	Emergency Funding programs. Further information is available at www.hfv.org.au or contact Andrea McColl at our office for a confidential chat. Applications are de-identified before proceeding to
Surname	
Address:	
Suburb:	
State: Postcode:	
Date of Birth:/	Stay well and stay safe.
Phone:	The HFV Team.
Mob:	_
Email:	
Payment Details	
Your donation payment can be made by Credit Card, Direct Deposit, C	heque or Money Order.
(If paying Direct Deposit please record your family name in the payme	ent reference).
I will be paying by:	
,	rect Deposit BSB 033-063 Acc No 116909
TOTAL Donation \$ (Donations over \$2 are tax deducta	able)
Credit Card Details: Visa Mastercard	
Card Number:	Expiry/
Name on cardSignature	
Your on-going assistance gives HFV a stronger voice and enables us to support	t, connect and empower our community.
Thank you for your continued support.	
This form will become a tax invoice once completed and payment ha	as heen received

Empower Connect Support