



# GenesisCare Foundation

Giving to the GenesisCare Foundation  
Thank you for your support

## Yes, I would like to make a donation to the GenesisCare Foundation towards...

- Research
  Patient Access
  Where the need is greatest

## I would like to give...

- \$50
  \$100
  \$150
  \$500
  Other \_\_\_\_\_

## I would like to make my donation...

- Monthly\*
  Until I advise
  Three years
  Two years
  One year
- Annually\*
  Until I advise
  Three years
  Two years
- One off
- I would like to help shape the GenesisCare Foundation's future through a donation in my Will. Please send me more information.
- I have already included a donation to the GenesisCare Foundation in my Will.

## I would like to pay by...

- Payable to GenesisCare Foundation
  Cheque
  MasterCard
  Visa
  American Express
- Card number \_\_\_\_\_ Expiry date \_\_\_\_\_
- Name on card \_\_\_\_\_ Signature \_\_\_\_\_

## My contact details are...

Please issue the receipt in  My name OR  My Organisation's name

- Title \_\_\_\_\_ First name \_\_\_\_\_ Last name \_\_\_\_\_
- Organisation \_\_\_\_\_ ABN \_\_\_\_\_
- Position \_\_\_\_\_ (For organisations, please provide the Company Name and ABN)
- Address \_\_\_\_\_ State \_\_\_\_\_ PCode \_\_\_\_\_
- Email \_\_\_\_\_
- Telephone \_\_\_\_\_ My date of birth is \_\_\_\_\_ OR My student/staff/donor ID is \_\_\_\_\_
- I am a GenesisCare  Staff member  Former Staff member  Patient  Former patient  Existing supporter

\* I understand I may cancel my authority for credit card charges for an ongoing pledge at any time by contacting the GenesisCare Foundation at the contact details below. The GenesisCare Foundation will confirm your request in writing.

Donation of \$2 or more are tax deductible in Australia. The GenesisCare Foundation is endorsed as a deductible gift recipient: ABN 80 616 530 879. The GenesisCare Foundation respects your privacy. Your contact details and the information you provide will be used only by the GenesisCare Foundation and only for the purpose you provide. We may also contact you to inform you about GenesisCare Foundation activities of general interest.

Please return completed form to: Mail: Building 1&11, The Mill, 41-43 Bourke Road, Alexandria NSW 2015; or via Email at: [info@genesiscarefoundation.org](mailto:info@genesiscarefoundation.org)  
If you have questions about this form, your gift, or the work of the GenesisCare Foundation, please contact us by email at [info@genesiscarefoundation.org](mailto:info@genesiscarefoundation.org)