



donation form

Your donations go a long way and every bit helps. It is only through your generosity that we can continue with our mission. On behalf of Ronald McDonald House® Auckland and the families we support, thank you *(please select your preferred gift)*:

I would like to donate:

\$20 \$35 \$50 \$100 \$200 \$300 Other: \$ _____

I can help by funding one family for:

\$120 One night stay \$240 Two nights stay \$360 Three nights stay
 \$840 One weeks stay

I am able to support your families at a monthly rate of :

\$50 \$30 \$20 \$10 Other: \$ _____

Personal details

Title: _____ First Name: _____ Last Name: _____

Street address: _____

Suburb: _____ Town/City: _____

Country: _____ Postcode: _____

Day phone: _____ Mobile: _____

Email: _____

How did you find out about us? _____

I will pay by:

Credit card (Visa/Mastercard) *please circle card* Cheque (payable to RMH Auckland Trust)
 Automatic payment *(please send me an AP form)*

Name on card: _____

Card number: _____ Expiry date (mm/yy): _____

Signature: _____

You may post your donation form to: Ronald McDonald House Auckland, PO Box 110119, Auckland Hospital, Auckland 1148. Alternatively you can make your donation by phone 09 303 1365 or fax 09 377 6581.

Go Green!

If you would like to help us save on postage and conserve paper please tick the box to receive your tax receipt by email. Email address for receipt: _____

Please contact me with information on the following:

Joining the 'Home away from Home' Business Club Joining the 500 Club
 Leaving a gift in my Will to Ronald McDonald House Auckland Becoming a House Volunteer
 How my service group/community group/school can help
 Having a speaker visit my service group/community group/school

Authorisation:

Date received: / / Recorded by: _____ Checked by: _____

