

Ethiopiaid Australia Foundation
Level 9, 505 Little Collins Street, Melbourne VIC 3000
(Office space kindly donated pro-bono)
Tel: 03 9223 7543 | Fax: 03 9223 7501 | E-mail: info@ethiopiaid.org.au CELEBRATING 25 YEARS ethiopiaid.org.au | Facebook.com/EthiopiaidAus | Twitter: @EthiopiaidAus

Ethiopiaid Donation Form

Name:
Address:
Supporter ID (if known) Ph No.:
Email:
PLEASE SELECT FROM THE FOLLOWING OPTIONS:
☐ Yes! I would like to make a <u>single donation</u> to Ethiopiaid. Amount: \$
☐ Yes! I would like to make a <u>regular donation</u> to Ethiopiaid. Amount: \$ every: Month/Quarter/Year (circle as appropriate)
Beginning on the/ (dd/mm/yyyy)
PLEASE SELECT FROM THE FOLLOWING PAYMENT METHODS:
☐ Please deduct funds from my CREDIT CARD (only Visa or MasterCard accepted):
Name on card:
Card No.: Expiry Date:/
Signature: Date:
I/We authorize Ethiopiaid Australia Foundation to debit my/our card according to the schedule specified above.
OR
☐ Please deduct funds from the following BANK ACCOUNT:
Account Name:
Financial Institution:
BSB: Account No.:
Signature: Date:
I/we authorize Ethiopiaid Australia Foundation (314011) to debit my/our account through the Bulk Electronic Clearing System (BECS) according to the schedule specified above

Please ensure you sign above to authorise your renewal.

ABN: 78 821 615 548