



ANNUAL APPEAL

Thank you for choosing to give your support.

CONTACT DETAILS

Name:
Address:
Phone: Email:

GIFT DONATION Gifts of more than \$2 are fully tax deductible.

I would like to make a donation to the following tax deductible fund;

- Scholarship Fund: [] support one child for one terms tuition at Montessori East \$3,225 [] support one child for a half years tuition at Montessori East \$6,450
- Library Fund naming rights: [] \$5,000
- Building Fund: [] \$1,000 [] \$2,000 [] other \$_____

OR, I would like to make a general donation of (please circle amount):

\$100 \$200 \$500 \$1,000 \$2,000 \$5,000 other \$_____

PAYMENT DETAILS

- [] please find attached a cheque for my donation
[] direct deposit: ME Pty Ltd, BSB 082-057 A/C 11-767-5183. Please be sure to reference your name so we can issue a receipt.
[] Please charge my credit card

Name on credit card: _____
[] Mastercard [] Visa

Credit card number: _____ Expiry date: _____
_____/_____

Signature: _____ Date: _____

For all enquiries
phone 02 9130 8313 fax 02 9130 8353
email alumni@montessori.nsw.edu.au

Please return this form to :
ME Foundation
8 Wellington Street, Bondi NSW 2026