Indigenous reading project - **DONATION FORM**

1 YOUR [DONAT	ION TYP	E					
Monthly		Once On	lly					
2 YOUR E	ONAT	ION AMC	DUNT					
\$200		\$100	\$50		\$30	Other	\$	
3 YOUR [DETAIL	S						
First name					Last	name		
Email					Date	of birth		
Phone						Mobile		
Address					S	Suburb		
State					Po	stcode		
4 YOUR F		NT METH	HOD					_
Card type		🗌 Mas	tercard	Visa	a 🗆		X Diners Club	
Card number								
Card holder's	name				Expir	y date		
Signature						Date		
Direct De	ebit							
Account name				F	inancial	institutio	on	
Branch					Date	e of birth		
BSB number					Account	t number		
Please read th Both signature	e Direc s are re	t Debit Ag equired for	reement on a joint acco	the follow ount.	ving pag	e before	you sign.	
Signature Signature						Date Date		
☎1300 882 330			⊴ <u>info@irp.o</u>				w.irp.org.au ACN 15	3 982 926

Direct Debit Agreement

By returning the above form I/we request Indigenous reading project (Irp) to arrange for funds to be debited from my/our account at the financial institution identified on the enclosed form and as prescribed through the Bulk Electronic Clearing System. This authorisation is to remain in force in accordance with the terms described in the Direct Debit Agreement following:

1. Direct Debiting is not available on every account. If in doubt, please ask your financial institution. If you wish to check your account details you will also need to contact your financial institution.

2. Your account will be debited on the 15th (fifteenth) of each month or the nearest working day. If Irp vary any of the debit arrangements we will provide you with 14 days' notice.

3. It is your responsibility to ensure sufficient clear funds are in the nominated account when payments are to be drawn. If the transaction is returned unpaid, Irp will contact you seeking your instructions.

4. Should you wish to cancel, defer or make alterations to the Direct Debit arrangement, please ring 1300 882 494 or write to Indigenous reading project, GPO Box 1593 Canberra ACT 2601 rather than your financial institution. We require 14 days' notice of request to cancel or alter your debit agreement.

5. Should you have any queries or dispute any Debit item, please contact Indigenous reading project or your financial institution.

6. Your records and account details will be kept private and confidential to be disclosed only if requested by yourself or the financial institution if a claim is made for an alleged incorrect or wrongful debit.

5 SEND YOUR FORM

Post:	Fax:	Scan + Email:
Indigenous reading project GPO Box 1593 Canberra ACT 2601	1300 882 158	donate@irp.org.au