
ST. MARY'S COMMUNITY FOUNDATION

DONATION FORM

I wish to make a donation of \$..... to the Foundation

I would like further information about including the Foundation in my Will.

.....
Surname

.....
Given name(s)

Address.....
.....

Telephone/Mobile.....

E-mail.....

Please forward completed form to:

St. Mary's Community Foundation
59 Holyrood Street
Hampton VIC 3188
