



**Yes! I want to help The Fred Hollows Foundation...**

I wish to make a **donation** to support The Foundation's programs  
for the following amount: NZD\$ \_\_\_\_\_ (please specify)

*Donations of \$5.00 and over are tax deductible in New Zealand.*

I will be **paying** by  cheque I money order (attached)

OR  Credit Card (please circle) Amex I Diners I Mastercard I Visa

Card number: \_\_\_\_\_ Expiry date: \_\_\_\_ I \_\_\_\_

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

I would like **more information** about:

- The Miracle Club (the monthly/annual pledge program)
- Making a gift to The Foundation in my will
- How to fundraise for The Foundation
- Purchasing a 'Gift of Sight' to commemorate a loved one
- The Foundation's range of merchandise

**My details** are: (please print clearly)

Donor number: (for existing donors if known) \_\_\_\_\_

Title: \_\_\_\_\_ Given name: \_\_\_\_\_

Family name: \_\_\_\_\_

Company name: (for corporate donations) \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ City: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Facsimile: ( ) \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Please **return this form** to:

The Fred Hollows Foundation (NZ)  
Private Bag 56908, Dominion Road  
Auckland 1030

or fax to: + 64 9 623 0703