CHILD WISE™

I wish to attend the Child Wise Gala Diner

Contact details

Mr / Mrs / Miss / Ms First Name: _____ Surname: _____

Address: _____

Suburb/City: _____

State: _____ Postcode: _____

Email Address: _____

Daytime: _____ Mobile: _____

Occupation: _____D.O.B._____

Credit Card Details

Please charge my: Visa ☐ MasterCard ☐ Amex ☐ Diners ☐

Name on Card: _____

Credit Card Number: __ __ __ __ - __ __ __ __ - __ __ __ __ - __ __ __ __

Expiry Date: ___ / ___ Signature of Cardholder: _____

Direct Deposit Details;

Financial Institution Name: **Bendigo Bank**

Name of Account Holder/s: **Child Wise Ltd**

BSB: **633 000** Account Number: **128 510 930**

SWIFT: BENDAU3B (for overseas deposits)

Donations to Child Wise of $2 or more are Tax Deductible.

Child Wise Ltd. PO Box 451, South Melbourne, Victoria, Australia 3205 ABN 57 098 261 575
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