



Cricket Division

PERSONAL DETAILS

Title: Mr Ms Mrs Miss Dr Other

First name/s: _____ Last Name: _____

Mailing Address: _____

Town/Suburb: _____ State: _____ Post Code: _____

Country: _____ Phone Home: () _____

Phone Business: () _____ Email: _____

GIFT DETAILS

Please accept my one-off gift of \$ _____

Please accept my MONTHLY gift of \$ _____ on the 10th of every month commencing on 10 / /11

Please accept my QUARTERLY gift of \$ _____ commencing on 10 / /11

Please accept my ANNUAL gift of \$ _____ commencing on 10 / /11

and continue until I notify you otherwise in writing. **Gifts are tax deductible**

Please direct my gift to: Cricket Division

PAYMENT DETAILS

Cheque (make payable to The University of Sydney)

Credit Card: Visa MasterCard American Express Diners Club

Card No: _____

Expiry Date: _____ Card Holder Name: _____

Signature: _____

I would like my gift to remain anonymous

Please send me information regarding the **University Bequest Program** _____

Thank you for your generous support

Please return this form to: Advancement Services, Building G02
The University of Sydney, NSW 2006 Australia,
fax 61 2 8627 8819
ABN: 15211513464 Charitable Fundraising No: 10369 CRICOS 00026A
CODE: **2400 47316 D0645** **P 06/11**