



ABORIGINAL EDUCATION COUNCIL (NSW) Inc

MEMBERSHIP APPLICATION/ RENEWAL

DONATION FORM

1. Complete this form
2. Choose method of payment
3. Return this form and the payment to: AEC (NSW) INC. PO Box 3120 Redfern NSW 2016 or email the form to admin@aec.org.au

DONER'S DETAILS (Please print clearly and in block letters)

Title (Mr/Mrs/Ms etc.) _____ Name _____

Address _____

Suburb _____ State _____ Postcode _____

Phone (AH) _____ Phone (BH) _____ Mobile _____

E-mail _____

How did you find out about the AEC _____

Amount: _____

HOW TO PAY

Post Please post this donation form together with your payment to:

AEC (NSW) INC. PO Box 3120, Redfern, NSW, 2016

Credit Card (Please check that the details you provide are complete and correct)

Amount: _____

Credit Card Type VISA MASTERCARD AMEX

Card number

Expiry Date /

Name on Credit Card _____

I would like to make the following donation to the AEC: \$20 \$50 \$100 Other \$_____

Please debit my credit card on a monthly basis Please make this a one off payment

Card Holder Signature _____

EFT

Please enter the following bank account details

AEC Donations Account

BSB: 182 512

Account Number: 961657723 (Please complete the top part of this form to enable a receipt to be issued)

Thank you very much for your generosity