

Membership Renewal Form

Thank you for continuing your Leukaemia Foundation membership.
Thanks to people like you, we're closer than ever to our goal of zero lives lost to blood cancer by 2035!

Your details, if anything is incorrect please cross out and enter the correct details

Full Name:

Home Ph:

Mobile Ph:

Address:

Email:

Selected Branch:

Please select your preferred method of communication

Email

Post

Only send administrative communications

Other ways to support

- Like other members, I would like to find out more about leaving a gift in my Will to secure a blood cancer free future
- I have already left a gift to the Leukaemia Foundation in my Will
- I would like more information on giving at work
- I would like more information on regular giving

Total membership fees payable (\$5 - per person annual inc. GST)

\$

Please accept my tax-deductible gift of

\$

Total Payment

\$

Cheque Money Order (made payable to Leukaemia Foundation)

Or debit my Visa Mastercard American Express

Card Number

Expiry

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Cardholders Name

Signature

Privacy notice: Your personal Information Is collected to enable us to provide you with a receipt for donations and Foundation news. You can request to have your details removed at any time by phoning 1800 620 420. To read more about how the Foundation uses your Information and our full privacy policy please visit leukaemia.org.au.

OFFICE USE ONLY

Supporter ID:
Updated Date:
Initials: