

Donation to Malyon College or Malyon Leadership

Name: _____ Date: _____

Address for Receipt: _____

Purpose of Donation (if any): _____

I wish my donation to be tax deductible

For Donation by Cheque:

- Please make out cheques to: "Malyon College"

For Donation by Credit Card:

Amount: Mastercard Visa

Card No:

CCV No (last 3 digits on back of card):

Expiry Date: ____/____ Name on Card: _____

Signature: _____

For Donation by Direct Debit:

Deposit funds in Malyon College account BSB:704913 Account No: 485

Amount:

*Please post to Malyon College, PO Box 6166, Mitchelton 4053
or fax to 3354 5660*