## Community Capital Campaign Pledge Form



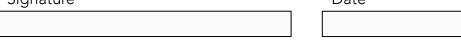
## **Contact Details**

First Name	Last Name
Email	
Billing Address* *This is required for tax purposes. Address Line 1	
Address Line 2	
Suburb	State
Post Code	Contact Phone Number
Pledge Amount \$	Donation Frequency One off
<ul> <li>♥</li> <li>Optional</li> <li>Sign me up to the quarterly newsletter!</li> <li>My first name and suburb can be published on the College website in appreciation of my donation.</li> </ul>	<ul> <li>Fortnightly</li> <li>Monthly</li> <li>Annually</li> <li>I understand it is my responsibility to establish a recurring payment arrangement with my banking provider.</li> </ul>

In signing this pledge, I understand my monetary donation will be processed into the HillSide Christian College Building Fund, and a receipt will be issued following each donation.

Signature

Date





Please return this Pledge Form to the HillSide College office or email to ourfuture@hillside.wa.edu.au