



DONATION FORM

Mr/Mrs/Miss/Ms/Dr Surname _____ First Name _____

Address _____

_____ Postcode _____

Phone (H) _____ (W) _____ (M) _____

Email _____

Amount \$ _____

Payment Method

Cheque/Money Order

Mastercard

Visa

Cheque/Money Order made payable to Cat Protection Society of NSW Inc

Credit Card Number: _____/_____/_____/_____

Signature: _____ Expiry Date: ____/____

Name on Card: _____

Donations of \$2.00 and over are tax deductible

Thank you for supporting the Cat Protection Society of NSW

Please return donation form to:

**Cat Protection Society of NSW
103 Enmore Rd
Newtown NSW 2042**

(If you include a stamped, self-addressed envelope for your receipt it will help us with our costs)

If paying by credit card, you may fax the donation form to: 02 9557 8052



Thank you