

## - Pledge Form -

*I wish to support The Churack Chair of Chronic Pain Education and Research*

### Option 1

I wish to make a one-off gift A\$

### Option 2

I wish to make a pledge of A\$  Payable over  1  2  3 years

Enclosed is my first payment of A\$

**Please note that the University will contact you to confirm your pledge details.**

### Option 3

I would welcome information about including Notre Dame in my Will.

### Donate via Electronic Funds Transfer (EFT)

The University of Notre Dame Australia Foundation Account – BSB: 086-217 Account Number: 792-144-554

When completing your Online Banking “transaction description”, please state Churack Chair.

I wish to confirm that I have donated via EFT and given a gift of A\$

### Donate via cheque/money order

Enclosed is my cheque/money order made payable to ‘The University of Notre Dame Australia’

### Donate via credit card

Please charge my credit card:  Visa  Mastercard

Cardholder's name

Card number

Expiry date  /

Cardholder's signature

### Personal Details

Title

First Name

Surname

Address  Home /  Work

Suburb

Postcode

State

Country

Home Tel

Work Tel

Mobile

Email

Student  Alumni Class of

Parent  Friend  Other

I have a connection to the following campus/es:

Broome  Fremantle  Sydney

In publications I/we wish my/our name to read as follows:

I would like my gift to remain anonymous.

### Please send to:

Office of University Relations

The University of Notre Dame Australia

PO Box 1225, FREMANTLE WA 6959