The Blackheath Golf Club Foundation

Securing the Future

Personal Details:		
Title First Name/s		
Last Name		
Mailing Address		
Town/Suburb	State	Post Code
Phone (Business hours) ()		
Email:		
Donation or Pledge Details:		
\Box I wish to become a member of the F	Foundation	
☐I intend to donate the sum of \$ Foundation	to support The	Blackheath Golf Club
☐ The full amount of \$ is part	id with the attached	cheque/by credit card
OR		
☐My donation will be paid in	equal instalments	s of \$ each.
Payments will be made in successive	years starting in the	month of 20
Credit Card Payments:		
Credit Card Type:		
Credit Card Number:	Ex	xpiry Date
Name on Card:		
If a tax deduction is required, please n Sports Foundation Ltd " and also con Donation Form. This form can be dow under "Club Foundation". If a tax de payable to "The Blackheath Golf Club	mplete the special A nloaded from the B duction is NOT req	Australian Sports Foundation Blackheath Golf Club website
All donations to support the Foundation	on are strictly volun	tary.
This donation form should be return	ned to:	
The Blackheath Golf Club Foundati	ion	

Unit 108, 6 Hale Road, Mosman NSW 2088