



connecting@Damascus

Damascus College Bright Futures Scholarship

GIVING FORM

GIVERS CONTACT INFORMATION

First Name:

Last Name:

Billing Address:

City:

State:

Postcode:

Contact Number:

Email Address:

BRIGHT FUTURES SCHOLARSHIP GIVING INFORMATION

I/we donate \$ _____ to be paid on: / /

I/we would like to be an annual giver and donate \$

Monthly

Your card will be charged the last Friday of the month, unless it is a public holiday and then it will be charged the following week.

Quarterly to be paid on: / / , / / , / / and / /

Yearly to be paid on: / /

Credit card type: VISA or MasterCard

Card Number:

Exp Date: / CCV:

This information is protected and only stored by the finance department for annual givers.

ACKNOWLEDGEMENT INFORMATION

What name/s would you like to appear when your donation is acknowledged by the College?

I/we wish to have my/our donation remain anonymous.

Return completed form to Damascus College Administration Office

1412 Geelong Road, Mt Clear VIC 3350 • info@damascus.vic.edu.au • P (03) 5337 2222 • F (03) 53302366

OFFICE USE:

Donations to be coded to: 4.10135 XAS

___ CASH ___ CREDIT CARD ___ CHECK

Date: ____/____/____