

Donate to



Name: _____

Address: _____

Email: _____

Donor Group Name: _____

Donation: \$1,000

Or: 2 x \$500 (Jun & Jan) 4 x \$250 (Jun-Sep-Dec-Mar) 10 x \$100 (Jun - Mar)



Name of Card: _____

Card Number: _____

Exp Date: _____ CSV: _____

Direct Deposit: Bendigo Bank.

BSB: 063-779 1022-8880 Ref: Your Name.

Email completed form to finance@lacrosseaustraliafoundation.com.au

WE INVEST IN LACROSSE



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