ICON CANCER FOUNDATION

I am making this gift to Icon Cancer Foundation in memory of

.....

Name .....

Address .....

.....

Suburb ..... Postcode .....

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I wish to contribute a: ☐ one-off donation; ☐ regular contribution of:

☐ $10 ☐ $20 ☐ $30 ☐ $50 ☐ $100 ☐ $250

Other: $ .....

☐ Monthly ☐ Yearly

(please supply credit card details below) .....

☐ MasterCard ☐ Visa

Name (as it appears on card) .....

Credit Card Number ..... / ..... / ..... / .....

Expiry Date ..... / .....

Signature .....

As a Registered Charity (CH1854) your donations of over $2 are tax deductible. A receipt will be posted to the above address for donations of more than $2.

For enquiries, please phone 07 3737 4500 or visit iconcancerfoundation.org.au

☐ I do not wish to be included on the Icon Cancer Foundation mailing list.

Thank you for your generous support.

In memoriam message

Please leave a message for the family with your gift in memoriam

PO Box 3787
South Brisbane QLD 4101
iconcancerfoundation.org.au

To promote, initiate and support clinical trials and research, striving towards a brighter future for cancer patients and communities.