

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

.....  
Name .....

.....  
Address .....

.....  
Suburb .....

.....  
Postcode .....

.....  
Phone .....

.....  
Mobile .....

.....  
Email .....

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                      /                      CSV .....

.....  
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](http://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](http://iconcancerfoundation.org.au)**

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