LIVING LEGENDS
The International Home of Rest for Champion Horses

DONATION FORM

I would like to donate: **OR** **I would like to pledge: $_____**

☐ $40 ☐ $50 ☐ $100 ☐ Monthly ☐ Quarterly

☐ $250 ☐ $500 ☐ $1000 ☐ Six-monthly ☐ Annually

☐ $2000 ☐ Other, $_____

YOUR DETAILS

Full name: _____

Address: _____ **Postcode:** _____

Telephone: _____

Email: _____

PAYMENT DETAILS

I would like to pay by:

☐ Cheque ☐ Money Order ☐ Visa ☐ MasterCard

If paying by credit card

Card number: _____

Name on card: _____

Expiry: ____/____

Cardholder's signature: _____

Thank you for your donation. Please send the completed form to:

Living Legends: The International Home of Rest for Champion Horses
PO Box B2, Bulla, VIC 3428

☐ Please send me further information regarding annual giving and bequests.

Living Legends follows the National Privacy Principles. Please be assured your details will remain confidential, since we do not supply our list to any other organisations or individuals.

Deductions over $2.00 are tax-deductible (ABN 47 855 471 565). A receipt will be mailed promptly.

Thank you!
Andrew Clarke
Chief Executive Officer