



Yes, I want to help change a Kapumfi child's life.

I'd like to sponsor: girl boy No preference

I will make regular monthly gifts of \$39:

monthly quarterly annually (Sponsorship is \$39 per month)

My details:

Mr/Mrs/Ms/Miss _____
First Name Surname

Address _____

Postcode _____

Ph (BH) _____ (AH) _____

Email _____

Date of Birth _____

Donations of \$2 and over are tax-deductible

Thank you

You'll receive your sponsorship information shortly!

Payment details:

Please debit my Visa Bankcard MasterCard
 American Express Diners Club number

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Expiry date:

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Signature _____

I authorise World Vision to deduct regular payments from my credit card until further notice.

OR I enclose my cheque/money order payable to World Vision Australia.

Return form to:

Kapumfi Child Sponsorship

Scotch College Accounts Office

1 Morrison Street, Hawthorn 3122

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