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**Yes**, I want to join:

- MasterMinds Regular Giving Program using my credit card**  
(complete section 1)
- MasterMinds Regular Giving Program using direct debit from my bank account**  
(a member of our team will contact you within 7 business days to discuss how to arrange this with your bank)

Donor Number: \_\_\_\_\_

**OR**

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ (W) \_\_\_\_\_ (H) \_\_\_\_\_ (mob)

Email: \_\_\_\_\_

Date of birth: \_\_\_ / \_\_\_ / \_\_\_

**SECTION 1 credit card only**

**Please debit the following amount from credit card each month:**

- \$100    \$75    \$50    \$30    \$20    Other \$ \_\_\_\_\_

Type of Card

- Bankcard    Mastercard    Amex    Visa    Diners

Card Number:

Expiry Date:   /

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

**Thank you for supporting our work towards better solutions for people with mental illness.**

Monthly debits will be made to your nominated credit card on the 15th day of each month. If a drawing date falls on a day which is not a business day, the drawing will be made on the closest business day. We will keep your credit card details confidential, except where the disclosure of certain information to your financial institution is necessary. This Direct Debit Authority will remain in force until you advise The Mental Health Research Institute that you wish to cancel your authorisation.