

Thank You For Supporting PFNZ.....



Please complete your name and address details here and donation information on the other side:

Name: _____

Address: _____

Town / City: _____

Postcode: _____

Email: _____

Phone: _____

Please return this form in an envelope to:

**Freepost Prison Fellowship New Zealand
Prison Fellowship New Zealand
PO Box 40657
Upper Hutt 5140**

You can also donate online at:

www.pfnz.org.nz

I'd like to receive Prison Fellowship communications by email

I am not currently in a position to donate but I'd like to be kept in touch with what Prison Fellowship NZ is doing.

■ ■ ■ ■ ■ ■ ■ ■ **Regular donation**

I would like to donate: (please tick as appropriate)

weekly fortnightly monthly other _____

To: Angel Walk General other _____

The sum of: \$ _____ commencing ____/____/____ by...

(a) Automatic Payment to: Prison Fellowship New Zealand
Account number 01 0242 0138571 00

I will set this up myself via Internet banking

Please send me an automatic payment form

(b) Direct debit from my credit card:

Card type: Visa MasterCard Amex Diners

Card Number: _____/_____/_____/_____

Expiry date: ____/____ CVC: _____

Signature: _____

■ ■ ■ ■ ■ ■ ■ ■ **Single donation**

I would like to help make a difference by donating \$ _____

I would like my donation to be used in the area of:

Family Care (includes Angel Tree and Breakaway)

Target Communities **General** **Other** _____

By: **Cheque:** I enclose my cheque for the above amount

Direct Deposit: Deposit of \$ _____ made into the bank account
of Prison Fellowship New Zealand on ____/____/____

Credit Card: (please debit my card with the above amount)

Card type: Visa MasterCard Amex Diners

Card Number: _____/_____/_____/_____

Expiry date: ____/____ CVC: _____

Signature: _____

Important: Please complete name and address details on the other side of this slip to enable us to thank and receipt you.

