

PO Box 201
Spring Hill
QLD 4004

Fax: 07 3259 8469
Phone: 07 3634 5100
ABN: 48 321126727



FOR A CANCER FREE FUTURE

I would like to make regular donations to help create breakthroughs in the battle against cancer:

My details:

Name _____

Address _____

Phone Number (h) _____

(w) _____

(m) _____

Email _____

RG50 10/2010

I'll gladly help with a regular monthly tax deductible donation for:

\$10

\$20

\$60

\$15

\$30

\$ _____ other*

I can't commit right now to a regular monthly donation, but I am happy to make a one-off donation of \$ _____

*Minimum regular donation \$10

Regular donations help us plan for the future and save on administration and postage

I would like to make my donation in honour of _____

Please direct my gift towards achieving breakthroughs in preventing and treating (select one):

Wherever the need is greatest

Prostate or testicular cancer

Breast cancer

I'd like to make my donation by:

Direct debit from my bank account* (please fill out your bank details overleaf)

OR please debit** my:

Visa

Mastercard

Amex

Diners

Name on card _____

Expiry _____

/

Signature _____

A cheque/money order is enclosed for my one-off donation (made out to Cancer Council Queensland)

*Direct Debit will occur on the 15th of each month

**Credit card payments will occur on the 30th of each month

Please return to:

Mail: Cancer Council Queensland
Reply Paid 201
Spring Hill QLD 4004

Fax: 07 3259 8469 (both pages)
Phone: 07 3634 5100
www.cancerqld.org.au

**Donations to
Cancer Council
Queensland
are tax deductible**

It is our policy to provide our supporters with information about our activities and from time to time to request further support. We respect your privacy and will not pass your name to any other organisation. If you would like to request no further mail from Cancer Council Queensland please telephone the Donor Hotline on 1300 663 936.

Since 1961, Cancer Council Queensland has touched the lives of many thousands of Queenslanders through research, patient support and education programs.



Each year, Cancer Council Queensland:

- helps around 50,000 Queenslanders through the **Cancer Council Helpline**
- provides free telephone based counselling to about 400 Queenslanders through the **Cancer Counselling Service**
- provides 1,400 families from across Queensland with **financial assistance**, and 600 regional families with access to **low cost accommodation**
- funds vital **cancer research**.

Your support as a regular "Breakthrough" giver can go towards ground breaking research like that of Professor Ian Frazer's cervical cancer vaccine, and the 45 or so other major research projects funded by Cancer Council Queensland each year.

These breakthroughs are the result of the people of Queensland – people just like you – supporting the work of Cancer Council Queensland.

DMC02735 10/2010

Regular Giving “Breakthrough” Form

Help make a difference to Queenslanders affected by cancer by becoming a regular supporter of Cancer Council Queensland

Because so much of our work is long term, the launch of our new “Breakthrough” program will allow Cancer Council Queensland to plan for the future.

A great way to partner with Cancer Council Queensland is by donating a regular amount each month. By doing so, you stand with us as a regular, committed supporter of our goal of a cancer free future.

You can make a regular monthly donation from your credit card, or by direct debit from a bank account. Your donation is processed automatically each month, which makes it easy for you to keep track of.

Your regular monthly donation saves you time, while saving us money because it reduces our administration costs. This means that even more of your tax deductible donation will go directly to the battle against cancer.

Direct Debit Authority

Direct Debit Request (for Regular Gifts Only)

I/We _____

Surname/Business name Given name/ACN

Address _____

Post Code _____

I/We request and authorise Cancer Council Queensland (Debit User No. 117821), until further notice in writing, to arrange for funds to be debited from my/our account (at the Financial Institution identified and as described in the Schedule below) any amounts which Cancer Council Queensland (Debit User) may debit or charge me/us through the Bulk Electronic Clearing System. Direct debits will occur on the 15th of each month.

Payment details

I'd like to help by making a regular tax-deductible donation of \$ _____ per month.*

Account to be debited

Account held in the name of: _____

BSB Number - Account Number

Financial Institution's Name _____

Financial Institution's Address _____

Post Code _____

*Minimum regular donation \$10
(If you would like to donate by credit card, please provide your credit card details overleaf)

Direct Debit Request – Service Agreement

I/We have read the “Customer Service Agreement” below and acknowledge and agree with its terms and conditions.
I/We request this arrangement to remain in force in accordance with the details set out above and in compliance with the “Direct Debit Request – Service Agreement”.

Customer(s) Name _____ Date / / _____

Customer(s) Signature _____

Customer Service Agreement

Our commitment to you:

We, Cancer Council Queensland (Debit User), note our commitment to you as the following:

- We will only arrange for funds to be debited from your account as authorised in this direct debit request.
- Where the due date falls on a non-business day, we will draw the amount on the next business day.
- We will provide written notice of any proposed changes to your drawing arrangement, providing no less than 14 days notice.
- We will advise you by notice, statement or invoice of the drawings.
- We reserve the right to cancel the drawing arrangement if drawings are continually returned unpaid by your nominated Financial Institution. Where drawings are returned unpaid we will arrange with you an alternate payment method. A fee may apply for drawings that are returned unpaid.
- We will keep all information provided by you and details of your nominated account at the Financial Institution, private and confidential.
- We will investigate and deal promptly with any queries, claims or complaints regarding debits, providing a response within 14 business days.

Your commitment:

Note your commitment to Cancer Council Queensland as the following:

- By signing this direct debit request, you have authorised Cancer Council Queensland to arrange for funds to be debited from your account.
- It is your responsibility to check with your Financial Institution prior to completing the Direct Debit Request, that direct debiting is available on that account (direct debiting is not available on all accounts offered by financial institutions).
- It is your responsibility to ensure at all times that sufficient funds are available in the nominated account to meet a drawing on the due date for payment.
- If there are insufficient clear funds in your account to meet a direct debit payment, you may be charged a fee by your financial institution and you may also incur fees or charges imposed or incurred by Cancer Council Queensland.
- It is your responsibility to advise us if the account nominated by you is altered, transferred or closed.
- It is your responsibility to arrange with us a suitable alternate payment method if the drawing arrangements are stopped, either by you or the nominated Financial Institution.
- It is your responsibility to meet any charges resulting from the use of the Direct Debit System. This may include fees charged to us as a result of returned drawings.

Your rights

- You may request to defer or alter the agreed drawing schedule, by giving written notice to us to the address above. Such notice should be received by us at least 14 business days prior to the next debit day.
- You may stop your individual debit by giving written notice to us. Such notice should be received by us at least 14 business days prior to the due date.
- You may cancel the Direct Debit arrangement at any time by giving written notice to us. Such notice should be received by us at least 14 business days prior to the due date. Your nominated Financial Institution is unable to cancel your Direct Debit Arrangement.

Disputes

- If you believe that there has been an error in debiting your account, you should notify Cancer Council Queensland directly on 07 3634 5100 and confirm that notice in writing, to the address above, as soon as possible so that we can resolve your query more quickly.
- If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

- If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding.
- Any queries you may have about an error made in debiting your account should be directed to us in the first instance so that we can attempt to resolve the matter. If we cannot resolve the matter you can still refer it to your financial institution, which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

Your privacy

- We will keep any information (including your account details) in your direct debit request confidential.
- We will make reasonable efforts to keep any such information secure and to ensure that any of our employees or agents who have access to this information do not make any unauthorised use, modification, reproduction or disclosure of that information.
- We will only disclose information that we have about you: to the extent specifically required by law; or for the purposes of this agreement (including disclosing information in connection with any query or claim).