

## MY DETAILS

## SELF DENIAL APPEAL

Title/Rank \_\_\_\_\_ First name \_\_\_\_\_ Surname \_\_\_\_\_ ☐ I am over 18 years old

Address \_\_\_\_\_ Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Corps/Centre \_\_\_\_\_

### Please accept my gift of \$ \_\_\_\_\_ towards the Self Denial Appeal

From the above amount, please allocate \$ \_\_\_\_\_ non-tax-deductible and \$ \_\_\_\_\_ tax-deductible\*

**Frequency:** ☐ Once-off ☐ Monthly ☐ Fortnightly ☐ Other \_\_\_\_\_ Start date \_\_\_\_\_

Receipt required? ☐ Yes ☐ No *NB: If you require a receipt, please insert your full address details*

## PAYMENT DETAILS

Please select your method of giving

To read our privacy policy visit [salvationarmy.org.au/privacy](http://salvationarmy.org.au/privacy)

☐ **Please find enclosed:** ☐ Cash ☐ Cheque/Money order payable to: The Salvation Army

☐ **Credit card:** ☐ MasterCard ☐ Visa ☐ Amex

Card number:                 Expires \_\_\_\_\_ / \_\_\_\_\_

Cardholder name \_\_\_\_\_ Signature \_\_\_\_\_

☐ **Direct Debit:** Please complete the Direct Debit Request on reverse side

**\*Non tax-deductible** or evangelical Mission Support funds support welfare initiatives and build the organisational strength of The Salvation Army in developing countries, through, for example, the provision of church halls, residences for officers, Bible, computers and training.

**Tax-deductible** funds are used to support Community Development initiatives such as poverty alleviation and clean water.

**The Salvation Army**  
Locked Bag 3010, NUNAWADING VIC 3131 | 1300 727 252  
[selfdenial@salvationarmy.org.au](mailto:selfdenial@salvationarmy.org.au) | ABN: 52 609 689 893

[www.selfdenial.info](http://www.selfdenial.info)

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Given name \_\_\_\_\_ Surname \_\_\_\_\_ request and authorise **The Salvation Army (Victoria)**  
**Property Trust ABN 64 472 238 844 & User ID 466205** to arrange a debit to your nominated account.  
This debit or charge will be arranged by The Salvation Army (Victoria) Property Trust's financial institution and made through the Bulk Electronic Clearing System Framework (BECS) from your nominated account and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

**AMOUNT OF DEBIT**

We will debit the sum of \$ \_\_\_\_\_ from your account.

Frequency of debit: ☐ Once-off ☐ Monthly ☐ Fortnightly

☐ Other \_\_\_\_\_ Start date \_\_\_\_\_

**YOUR ACCOUNT TO BE DEBITED**

Name/s on account \_\_\_\_\_

Financial Institution Name \_\_\_\_\_

BSB \_\_\_\_\_ Account number \_\_\_\_\_

**YOUR CONTACT DETAILS**

Address \_\_\_\_\_ Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**CONFIRMATION**

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request you confirm that:

- You are authorised to operate the nominated account; and
- You have understood and agreed to the terms and conditions set out in this Request and in your Direct Debit Request Service Agreement.  
To read our Direct Debit Request Service Agreement visit: [selfdenial.info/donate](http://selfdenial.info/donate)  
We will supply you with a Direct Debit Request Service Agreement by your preferred contact method within 7 business days.
- You have understood and agreed to The Salvation Army's commitment to protecting your personal information.  
To read our privacy policy visit [salvationarmy.org.au/privacy](http://salvationarmy.org.au/privacy)

Signed in accordance with the authority on your account: Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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Signed in accordance with the authority on your account: Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_