

Yes, I would like to help Sight For All's life-changing eye health projects in developing countries and Australian communities.



PLEASE ACCEPT MY:

One-off gift of:

\$25 \$50 \$100 Other: \$ _____

Monthly gift of:

\$25 \$50 \$100 Other: \$ _____

PAYMENT DETAILS:

Cheque / Money Order (Payable to Sight For All)

OR

Please charge this card as Visa Mastercard

Card Number Expiry /

Name on Card: _____ Signature: _____

PERSONAL DETAILS:

Please check your details are correct

Name

Address

Email

Phone

I would like to learn more about leaving a gift in my will to Sight For All

**ALTERNATIVELY, PLEASE CALL 0428 049 888 OR DONATE ONLINE AT [SIGHTFORALL.ORG/DONATE](https://sightforall.org/donate).
DONATIONS OF \$2 OR MORE ARE TAX DEDUCTIBLE.**

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how you can access and correct your personal information; (ii) how you can lodge a complaint regarding the handling of your personal information; and (iii) how any complaint will be handled by SFA. You may contact our Privacy Officer with any queries via email: admin@sightforall.org. or mail: Privacy Officer, Sight For All, PO Box 7028, Hutt Street, Adelaide, SA, 5000 or telephone: 08 8410 6855.

Please tick here if you do NOT want to receive any future promotional communications by

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