

In loving memory

Please complete the form below and return it together with your gift to the Baker Heart and Diabetes Institute - *Thank you*.

I would like to celebrate	the life of:	
With the enclosed gift of: <u>\$</u>		
Would you like us to advise t	the family or friends that you hav	ve contributed? Yes No
If yes, please provide details	s of the person to be advised:	
Name:		
Address:		
Their relationship (wife, bro [.]	ther, friend) to the person whose	life we are celebrating:
Please make your cheque	e payable to the Baker Heart a	and Diabetes Institute. Your gift is tax deductible
Your name:		
Your name: Your address:		
Your name: Your address:		Postcode:
Your name: Your address: Your phone: <u>(h)</u>		Postcode:
Your name: Your address: Your phone: <u>(h)</u>	(w)	Postcode:
Your name: Your address: Your phone: <u>(h)</u> Donation amount: <u>\$</u> Please tick: Cheque	(w)	Postcode:
Your name: Your address: Your phone: (h) Donation amount: \$ Please tick: Cheque Card No:,,,	(w) Money Order Maste	Postcode:

A Memorial Gift is a meaningful tribute which offers comfort and hope for those who are left behind. Your gift to the Baker Heart and Diabetes Institute will help our vital research to reduce death and disability from diabetes and cardiovascular disease. *Thank you*.

