I would like to contribute to the Medbury School Foundation



| Name: | | | |
|---|----------|-------------------------|------------|
| Address: | | | |
| Tel: | | | |
| Email: | | | |
| Relationship with the School: | | | |
| I apply to be a member of the Medbu | ury Scho | nool Foundation | |
| I will contribute: | | | |
| A one off donation of \$ Please make payment to Medbury School Found | | | 0 |
| A pledge of \$ over 1, 2, 3 or | more y | YEAIS (please specify) | |
| To be paid: Annually Quarterly | | Six-Monthly Monthly | |
| I would like to pay by: | | | |
| Deposit to Medbury School Foundation | | | ate forms) |
| Signed: | | | |
| Name: | Date: | / / | |
| A legacy or a bequest. Would you con | sider in | ncluding Medbury in you | r Will? |

Post: PO Box 29006, Riccarton, Christchurch 8440 Email: office@medbury.school.nz The Medbury School Foundation is a registered Charity (CC30826). Up to one-third the value of donations may be eligible for a tax credit.