



**ACTION FORM FOR CONTRIBUTIONS TO THE QMC FOUNDATION**

(All contributions made to the Foundation will be receipted and are eligible for tax rebates or deductibility as prescribed by current legislation)

**A. DONATIONS**

YOUR PERSONAL DETAILS (If you are donating jointly with someone else include their details as well)

First Name:..... Last Name:.....

First Name:..... Last Name:.....

Address:.....

.....

Phone:..... Mobile:..... Email:.....

FILL IN THE DETAILS FOR THE TYPE OF CONTRIBUTION YOU WOULD LIKE TO MAKE

**1. Singular Gift**

I/We would like to make a one-off donation of \$.....

**2. Annual Giving**

a. I/We would like to make a donation this year of \$.....

b. I/We would like to pledge \$..... over .....(number of years)

**3. Bequest/Endowment**

I/We would like to make a bequest/endowment as follows: (please give a brief outline)

.....  
.....  
.....

I/We require someone to contact us to formalise the matter of my/our bequest  
(Tick the appropriate box) Yes  No

PLEASE INDICATE WHICH FUND/S YOU WOULD LIKE TO PUT YOUR CONTRIBUTION TOWARDS

Building and Capital Fund  Retained Capital Fund  Scholarship Fund

IF YOU HAVE CHOSEN A SINGULAR GIFT OR ANNUAL GIVING PLEASE INDICATE HOW YOU WOULD LIKE TO MAKE YOUR PAYMENT

- 1. Cheque enclosed
- 2. Credit Card  (please complete the details of your card below)
  - Amex       Visa       Mastercard       Diners       Bankcard
  - Card Number:
  - Name on Card:.....
  - Expiry Date: .....
  - Signature: .....
- 3. Automatic Payment or Internet Banking

The details of the Foundation’s Bank Account are as follows:

Account Name: Queen Margaret College Foundation Trust 2005  
Bank: ANZ  
Branch: Wellington  
Account Number: 01-1823-0009780-00

- 4. E-payment via the school’s secure ‘pay your accounts’ service
- Date payment made: .....

IF YOU HAVE CHOSEN A BEQUEST/ENDOWMENT WOULD YOU LIKE US TO SEND YOU SOME SUGGESTED WORDING FOR YOUR WILL OR CODICIL?

Yes                       No

**B. SPONSORSHIP**

If you would like to sponsor fundraising or other Foundation Events please complete your details below:

Name of Company .....

Contact Details:

First Name..... Last Name:..... Position:.....

Phone:..... Mobile..... email:.....

Type of sponsorship preferred:

Cash       In Kind       Describe goods/services:.....

**RETURN THIS FORM TO:** Development Director, Queen Margaret College, P O Box 12 274, Thorndon, Wellington. Phone (04) 473 7160. Fax (04) 495 9184. Email: [karen.radford@qmc.school.nz](mailto:karen.radford@qmc.school.nz)