

# Support Australia's finest baroque orchestra

## 1. CONTACT DETAILS (please print clearly)

Dr / Mr / Mrs / Ms / Miss / Other \_\_\_\_\_

First Name \_\_\_\_\_

Surname \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_  
\_\_\_\_\_

Yes, please email me information from time to time with news, concert and event details, and special offers, etc.

## 2. LEVEL OF PATRONAGE

I would like to support the Orchestra by becoming a Patron at the nominated level:

- |  | Donation Amount |
|--|-----------------|
| <input type="checkbox"/> <b>CHRISTINA</b><br>\$10,000 (or above) | _____           |
| <input type="checkbox"/> <b>RUSPOLI</b><br>\$5,000 - \$9,999     | _____           |
| <input type="checkbox"/> <b>DURAZZO</b><br>\$1,000 - \$4,999     | _____           |

OR

I would like to support the Orchestra by becoming a Supporter at the nominated level:

- |   | Donation Amount |
|---|-----------------|
| <input type="checkbox"/> <b>SUPPORTER I</b><br>\$500 - \$999  | _____           |
| <input type="checkbox"/> <b>SUPPORTER II</b><br>\$250 - \$499 | _____           |
| <input type="checkbox"/> <b>SUPPORTER III</b><br>\$2 - \$249  | _____           |

Donations to the Australian Brandenburg Orchestra of \$2 or more are tax deductible\* and a receipt will be issued.

\*Register of Cultural Organisations under subdivision 30-B of the Income Tax Assessment Act 1997

## 3. PAYMENT DETAILS

Please find enclosed my cheque for

\$ \_\_\_\_\_  
(payable to Australian Brandenburg Orchestra)

OR

Please charge to my credit card the amount of \$ \_\_\_\_\_

Visa  Mastercard  AMEX  Diners  
Frequency:

Once  Weekly  Fortnightly  Monthly

Card number  
\_\_\_\_\_

Expiry \_\_\_\_\_ / \_\_\_\_\_ AMEX ID \_\_\_\_\_

Cardholder's Name (as it appears on the card)  
\_\_\_\_\_

Signature \_\_\_\_\_

I also wish to pledge the above donation for an additional period of:

1 year  2 years  3 years

You will be notified on the anniversary of your first donation

## 4. ACKNOWLEDGEMENT

Please list my name(s) in any acknowledgements as:  
\_\_\_\_\_

I wish my gift to remain anonymous

Please send me information about leaving a gift to the Australian Brandenburg Orchestra in my will

## 5. RETURN

**Australian Brandenburg Orchestra**  
**Reply Paid 73469**  
**Edgecliff NSW 2027**

**Address** 142 New South Head Rd Edgecliff Sydney NSW  
Australia  
**Post** GPO Box 4416 Sydney NSW 2001 Australia  
**Telephone** 02 9363 2899 **Facsimile** 02 9327 2593  
**Email** mail@brandenburg.com.au  
**Donate Online**  
www.brandenburg.com.au/support/donations.shtml