

Staff use only	
Staff member:	
Date:	
Donor no.:	

The Celebration Steps - Paver donation application

Donor details	
Name:	
Address:	
Contact Number:	
Email:	

Engraving details																	
Line 1	<table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td> </tr> </table>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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Line 2	<table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td> </tr> </table>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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Payment details - IF ALREADY DONATED ONLINE DO NOT COMPLETE THIS SECTION			
<input type="checkbox"/> Cash	<input type="checkbox"/> Cheque No	<input type="checkbox"/> Direct deposit	
Credit card:	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
Name on card:			
Card number:			
Card CCV:		Expiry Date:	

Certificate		
<input type="checkbox"/> Anniversary/Wedding	<input type="checkbox"/> Baby	<input type="checkbox"/> Furry Friend
<input type="checkbox"/> Birthday	<input type="checkbox"/> Celebrate a life	<input type="checkbox"/> Mother's/Fathers Day
<input type="checkbox"/> Other :		
Certificate Message:		

Donor declaration	
Recognition approval (website/annual report):	<input type="checkbox"/> Yes <input type="checkbox"/> No
View Paver Policy online here .	Paver Policy read and accepted <input type="checkbox"/> Yes

I declare that the information provided in this application is true and correct at the time of signing.

Signature:	Date