



DONATION REQUEST FORM

Organisation: _____

Type: Affiliated Association Netball Club Not-for-profit Organisation
 Charitable Event Other:

Reason for Request: _____

Items Requested: Signed Memorabilia Melbourne Vixens Show Bags
Quantity: _____ Other _____

Contact Name: _____

Mailing Address: _____

Suburb/Town: _____ State: _____ Postcode: _____

Daytime Phone: _____ Email: _____

Event Name: _____ Event Date: _____

Are you a Netball Victoria member: Yes No Membership No. _____

Are you a Melbourne Vixens member: Yes No Membership No. _____

Please return completed form to:

Mail: Donations
Netball Victoria
487 King Street
West Melbourne VIC 3003

Fax: 03 9321 2233

Email: info@netballvic.com.au

Please Note:

1. Completion of this form is a request only and does not guarantee a donation.
2. If successful the applicant is responsible for the cost of postage.