

AMAROO 2010 CHALLENGE

CONTRIBUTIONS BY CREDIT CARD

First Name: Last Name:

Address:

Country: Phone:

Fax: E-Mail:

I wish to use: Visa MasterCard Bankcard Diners American Express JCB

Name on card:

Card No.: Expiry Date:

REGULAR DONATIONS

Please debit the amount of Aus\$ Monthly Quarterly Annually

Commencing on: until I advise you further.

Date: Signature of cardholder:

ONE-OFF DONATION

Please debit the amount of Aus\$

Date: Signature of cardholder:

This form replaces/updates any previous one

In addition to my contribution, I wish to be regularly updated on the developments at "Amaroo".

BANK TRANSFER OR DIRECT DEBIT

Account name: Elan Vital Inc/ International Conferences Account
Account number: 64 270 6566
Bank Name: National Australia Bank
Branch Number: 084 737
Bank Address: 126 Elizabeth Street, Brisbane, QLD 4000, Australia
SWIFT-Code: NATAAU3304B

CONTRIBUTIONS BY MAIL

Please make cheques payable to:
Elan Vital Inc,
PO BOX 181, IPSWICH,
QUEENSLAND 4305, AUSTRALIA

YOU MAY MAIL OR FAX THIS FORM TO:

Elan Vital Inc,
PO BOX 181, IPSWICH,
QUEENSLAND 4305, AUSTRALIA

Fax: + 61-7-5467-2394