

Donation Form for Individuals to the Zonta Foundation for Women

Donor Details

Name: _____ Email: _____
 Address: _____ Phone Number: _____
 Zonta Club: _____
 Amount of Donation: _____ NZD\$ _____
 Frequency: One off payment Monthly Quarterly

Designation

Zonta Foundation For Women Projects and Programmes NZD _____

Payment

Zonta International District 16 Charitable Trust 12-3091-0184848-50
 Bank details Please email the form confirming your
 electronics donation to
 _____ treasurerd16@zonta.org.nz

Tribute Gift

Amount NZD\$ _____
 This gift is in Honour of _____ Please state occasion _____
 This gift is in Memory of _____
 Address: _____
If gift is in memory please give name of person to receive notice of your memorial gift