

I would like to make a donation/become a "Friend" of the **Northland Hospital Chaplaincy Trust** and support the ministry in the Northland Hospitals, based in Whangarei, Kaitaia, Dargaville and Kawakawa, as follows:

"Friend" Subscription	\$30.00
Donation	<u>\$.....</u>
Total Payment	<u><u>\$.....</u></u>

Please tick the appropriate box below:

Payment by Online Banking

Account Number 12-3099-0630523-00 – Please send us your name & address on the form below and enter your name in the Reference box on your online payment.

Payment by Cheque

**All donations greater than \$5.00 are deductible for Tax purposes.**

Charities Commission Registration Number: CC 43276

Name: Surname \_\_\_\_\_  
First Name or Initials \_\_\_\_\_  
Street/ PO Box / Number \_\_\_\_\_  
Suburb \_\_\_\_\_  
Town/City \_\_\_\_\_  
Post Code \_\_\_\_\_

Post to: The Treasurer  
Northland Hospital Chaplaincy Trust  
12 Kotare Crescent  
Maunu  
Whangarei 0110

Or email to: [nhct.treas@xnet.co.nz](mailto:nhct.treas@xnet.co.nz)