



PLEASE SEND FORM AND DONATIONS TO:
SMART Recovery Australia,
33 Saunders St, Pyrmont NSW 2009

2022 Pledge Form

YOUR DETAILS

PARTICIPANT/TEAM NAME:

Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Mx ☐ Dr ☐ First Name: Last Name:
Address: Apt./Suite:
City: State: Postal Code:
Email: Home Tel.: Bus. Tel.:

Tax receipts will be issued for \$20 or more, unless otherwise requested. The donor's name and address must be clearly printed and complete on the form below. Please do not include online pledges on this form.

All cheques should be payable to: SMART Recovery Australia.

ABN. 68 217 832 949

DONOR INFORMATION

FIRST NAME	LAST NAME	HOME ADDRESS	CITY	STATE	POSTAL CODE	DONATION AMOUNT	RECEIPT REQUIRED
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
TOTAL DONATIONS \$							

SMART Recovery Australia is dependent upon the generous support of donors and volunteers to fulfill its mission. We collect your personal information in order to process your donation, issue a tax receipt, and provide updates about our impact and other ways to help. It will not be sold or traded with other organisations.

Have a question?



smartrecovery@srau.org.au



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SMART Recovery®
Life beyond addiction