



17 Francis Street  
Echuca VIC 3564  
Phone 03 5485 5000

**We invite you to make a difference**

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Address: .....

Telephone: .....

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Enclosed is my gift for \$ .....

My cheque payable to Echuca Regional Health Foundation is enclosed

Please charge my:

Mastercard  Visa  Amex  Diners

Expiry date: \_\_ / \_\_

Signature: .....

Please complete and forward to:

**Echuca Regional Health Foundation**

17 Francis Street

Echuca 3564

(03) 5485 5000

[erhexec@erh.org.au](mailto:erhexec@erh.org.au)

[www.erh.org.au](http://www.erh.org.au)

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