

# Garvan's Pancreatic Cancer Research Order to Sell Awareness Ribbons



GARVAN  
INSTITUTE

Garvan Research Foundation  
is the marketing and fundraising arm of Garvan Institute of Medical  
Research  
ABN: 91 042 722 738

## Your Details

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Pancreatic Cancer Awareness Ribbons

- Pins are available in **packs of 25, 50, 100, and 150**
- Pins are to be sold at \$3.00 each. **Payment for the ribbons is required upfront.**
- Additional supplies can be ordered by contacting 1300 73 66 77.

25 Ribbons    50 Ribbons    100 Ribbons    150 Ribbons   Date Required \_\_\_\_\_

## Payment Options

**Cheque.** Please make cheque payable to Garvan Research Foundation.

\* Please attach the cheque or money order to this form and send to Garvan Research Foundation, Attn: Public Engagement Coordinator, Reply Paid 68593 Darlinghurst NSW 2010 (*no stamp required*)

**Cash Deposit**

If you have cash, deposit it into the Garvan Research Foundation - Gift Account and attach the bank deposit receipt to this form.  
BSB: 082057   Account: 567562610

**Credit Card.** Please deduct the payment total from my credit card.

Card Type:    Visa                       Mastercard                       American Express                       Diners  
Name on Card: \_\_\_\_\_                      Expiry Date: \_\_\_\_\_

Card Number: \_\_\_\_\_                      Signature: \_\_\_\_\_

## Communication Options

Please let us know if you:

- I would like to receive communication from Garvan Research Foundation
- I would like to receive communication from Australian Pancreatic Cancer Genome Initiative

I acknowledge having read and agreed to the fundraising rules and regulations outlined in [Garvan's Fundraising Guidelines](#)\* and indemnify Garvan from and against any claims for injuries or damage arising from the event or product or service.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Garvan Use Only

Received: \_\_\_\_\_                      Approved: \_\_\_\_\_                      ID Number: \_\_\_\_\_

Company Pack                       Individual Pack                      Date Posted: \_\_\_\_\_

Received: \_\_\_\_\_                      Signature: \_\_\_\_\_                       Finalised

**Please complete and return this form to:**

Garvan Research Foundation Reply Paid 68593 Darlinghurst NSW 2010 (*no stamp required*)  
Phone: (02) 9295 8110   Fax: (02) 9295 8507   Email: pec@garvan.org.au   Website: www.garvan.org.au