



Expression of Interest Form

CP Awareness Week 2-8 August 2009

To: The Centre for Cerebral Palsy, PO Box 61, Mount Lawley 6929

Contact name _____

School name _____

Address _____

Phone _____ Email _____

We would love to support Cerebral Palsy Awareness Week 2009 in the following ways...
(Please indicate your area of interest by ticking one or more of the boxes below and send back in the reply paid envelope)

- Yes, please send us a School Pack
- Promote CP Awareness Week – in your publications and website or display posters in your office or business vicinities
- Organise a fundraising activity – organise a free dress day or an activity at your school
- Sell merchandise
- Collect unwanted mobile phones to recycle for CP
- Volunteer your time - 7th August in the City, major train station or regional WA

OR...Please accept our donation of \$

- Our cheque/money order is enclosed and made payable to The Centre for Cerebral Palsy
- OR, please debit the amount above to my credit card as detailed below
- Mastercard Visa

Card Number

Name on Card _____ Expiry Date _____

Signature _____

Please return this expression of interest form to:
The Centre for Cerebral Palsy, PO Box 61, Mount Lawley WA 6929.

Your support will make a difference

Details will be sent to you prior to CP Awareness Week in the areas you have indicated
Donations of \$2.00 and over are tax deductible.
www.tccp.com.au

