



Supporters Program

2023

Council on the Ageing Western Australia Inc.



COTA (WA) Supporter

We wish to become a Supporter of Council on the Ageing Western Australia Inc.

Name of Organisation:

Postal Address:

Contact Number:

ABN:

Email:

Signature:

Supporter Delegate

The following person has been appointed as the Delegate for the ensuing year.

Name:

Position:

Contact Number:

Email:

*The COTA (WA) eNewsletter will be sent to the Delegate's email address given above.

Supporter Contribution

You will be invited to renew your support on an Annual Basis: January to December Pro-rata.

Supporter Contribution (exclusive of GST)

\$1,500 per annum

For organisation less than 1 million turnover

\$ 500 per annum

I would like to know more about sponsorship opportunities:

Yes

No

*Complete this form and email to dana@cotawa.org.au

How to Pay

By **Credit Card**

To pay via MasterCard or VISA

Card Number _____

Expiry Date _____ / _____

Card Holder's Name (please print)

Date:

By

Account Details

Bank

BSB

Account Number

Ref Org Name

EFT

COTA WA

Bankwest

306 061

0170 346

*** Tax Invoice will be sent upon receipt of payment.**