



Invest

into a young person
and create a brighter
future for all of us

Join with Youth Opportunities

and provide young people access to
Personal Leadership training and
scholarships which will help them develop
the skills, habits and confidence to thrive!



IMPROVE
ACCESS TO
OPPORTUNITIES

CHANGE
A YOUNG PERSON'S
LIFE

DISRUPT THE
CYCLE
OF DISADVANTAGE

By committing to make an annual gift to Youth Opportunities in support of our Personal Leadership and Scholarship Programs, you join with a collective of donors who believe in unlocking the potential of young people to live their best life, no matter their circumstances.

As a student program and scholarship donor you will be provided with:

- An annual impact update from our graduates.
- An annual invitation to a Youth Opportunities Personal Leadership Program graduation.
- An annual invitation to a Youth Opportunities Scholarship event.
- Acknowledgement in our annual Organisation Report.



**We must have graduates to give opportunities to;
and we must have opportunities to give graduates.**



I/we would like to support young people to participate in the Youth Opportunities Personal Leadership Program and provide Scholarships to deserving students for the following term:

Supporting _____ (no. of) students to participate in the YO Personal Leadership program @ \$1,000 per student, per year (minimum \$1,000 Personal Leadership program support).

And

Supporting _____ (no. of) student scholarships @ \$1,500 per scholarship.

- ☐ Until further notice.
☐ For one year of support, with renewal at my discretion.

Total donation amount per year (minimum \$2,500) _____

Personal details (please fill out one form per individual)

Please acknowledge in the names of _____

First Name _____

Last Name _____

Email _____

Phone _____

Company _____

Suburb _____

Address _____

Post Code _____ State _____

Payment details

- ☐ Please find enclosed my cheque or money order
☐ EFT payment: BSB: 085 458 ACC: 24779 7250
Ref: Surname (Please notify YO via email with your name and donation amount)
☐ VISA ☐ Mastercard
☐ I would like to pay the full amount
☐ Please debit my account monthly
(Please notify YO via email with your name)

Card Holder _____

Card Number _____ / _____ / _____ / _____

CCV _____ CCV _____ EXP _____

Signature _____

Forward to:

Youth Opportunities Australia Limited.
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T 8240 3133 or E fundraising@youthopps.com.au