Canossaville Children's Home

DONATION FORM

Is this a personal response or are you representing a group?

☐ Personal ☐ Group/Company

Your Name

Your NRIC/FIN Number

Group/Company Name (if applicable)

Position/Occupation

E-mail Address

Mailing Address

_____

_____

_____

_____ Postal Code:_____

Contact Details:

Residence:_____ Office: _____

Mobile: _____ Fax:_____

Email:_____

TO DONATE: I/We like to:

☐ Make a donation of S$ _____ Other Currency:_____

☐ Become a regular ☐ monthly or ☐ annual donor of S$ _____

For more information, contact:
Canossaville Children's Home
1 Sallim Road (Gate 3) Singapore 387621
Tel: +65 67485777

Send completed form together with your donation to the address mentioned on this form.
Thank you for your generosity. God Bless!