MORE ABOUT YOU

Name & Surname: _____ Title: _____

Address: _____

_____ Code: _____

E-mail: _____ Cell no: _____

Birthday: _____

DEBIT ORDER		DONATION	
☐ I want to contribute every month by debit order.		☐ I want to contribute monthly/once-off with electronic funds transfer (EFT).	
☐ I have a debit order and would like to increase it.			
From first day of (month):		Amount in words:	
Amount:		Amount:	

YOUR BANK DETAILS (for debit order options)

Account holder: _____

Bank: _____ Account type: _____

Account no: _____

Branch: _____ Branch code: _____

I/we hereby agree that the parties, including Netcash, hereby authorized to implement the withdrawal(s) against my/our account shall not assign or assign any of their rights to any third party without my/our prior written consent and that I/we may not transfer any of our obligations in terms of this contract/authorization to any third party without prior written consent from the authorized party. This authorization may be canceled or modified by me in writing at any time.

Signature: _____ Date: _____

an initiative of
Social Upliftment Services

OUR BANKING DETAILS (for electronic transfer option)

Acc Holder: Social Upliftment Services
Bank: ABSA Centurion
Account Type: Cheque
Branch code: 632005 (Centurion)
Acc number: 4074996231

Cnr of Hendrik Verwoerd Drive & Hippo Avenue Zwartkop X4
☎ 082 773 6000
anja@socialupliftmentservices.com
www.socialupliftmentservices.com

Registration Number: 2009/012075/08 ; PBO Number: 930036703 ; NPO Number: 072-316-NPO

By completing the document, I give permission for the information to be processed by SUS and Choose Children SA for functioning according to SUS's POPIA disclaimer.