Date: \_\_\_\_\_



Singapore Association of the Visually Handicapped 47 Toa Payoh Rise Singapore 298104

## SAVH Festive Season Amazing "Raise" 2019/20 ~ A Festivity of Giving ~ (NCSS Permit Number: 2019101675)

We/I w	ould like to contribute towards the event by	<b>/</b> :											
	Sponsoring a team of visually handicapped (Team sponsorship to reach SAVH by 31 De sponsor when we receive your sponsorship)	cember 2019.	-		tails	wil	ll be p	rovi	ded	to t	he		
	Making an outright donation of (S\$)	·											
•	Payment Mode:  By Cheque – Cheque Number  Please make cheque payable to 'SAVH'  Singapore Association of the Visually Handi	and mail the	che	eque	alor	ng v		his	rep	ly fo	orm	to	
•	By Credit Card – AMEX/Visa/MasterCard	Теаррей, 47 То		ayon	Nise	, 311	igapo	T = 2	961	.04.	$\top$		
	ame on Credit Card Expiry date (mm/yy)												
250% ta	complete the box below for tax deduction reax deduction.  of Donor (Prof/Dr/Mr/Mdm/Mrs/Ms) or C  UEN Number:			0115 1		1115	event			,ibie			
	ss (Home/Office):												
Home/Office Tel:		Contact Person:											
Mobile Tel:		Email addres	ss:										
Signat	ure /Company Stamp:												
Our/my	preferred channel of communication is via:  Phone call Emai												

By submitting this form, we/I fully understand and consent to the collection, use, disclosure and retention of our/my personal data for the purposes of processing donations, performing donor relations activities, carrying out fundraising appeals and events, send marketing communication materials and submission of donation data to the IRAS for tax-deduction computation in accordance to the terms stated in SAVH's Data Protection Policy (A copy of which is available at <a href="www.savh.org.sg">www.savh.org.sg</a>). We/I confirm that all information and details here are true, correct and complete and SAVH will maintain the information confidentially and will not use our/my personal data for other purposes.

