



Caring for Persons with Profound Intellectual Disability

P O Box 121 Edenvale 1610
Tel. (011) 609-7246 Fax (011) 452-4560
E-mail address: info@littleeden.org.za
Web address: www.littleeden.org.za NPO 001427

Name:

Address:

City/Town: Post Code:

Yes, I/we will sponsor a child at LITTLE EDEN through a regular monthly gift of

R3 200 R1 600 R800 R400 R200

I/We prefer to sponsor a girl boy

whose birthday falls in the month of

I/we cannot sponsor a child at this time, but here is a donation of R..... towards caring for the 300 special children and adults at LITTLE EDEN.

Please indicate how payments will be made

- Cheque/postal order, made payable to LITTLE EDEN Society
- Debit order [please complete details below] Credit card [please complete details below]
- Direct deposit/Internet Banking [please use your company name as the beneficiary reference and fax through a copy of the deposit slip if possible] Online at www.littleeden.org.za

Please complete this section for a donation by monthly DEBIT ORDER

I/We wish to sponsor a child at LITTLE EDEN by monthly debit order for an amount of R per month from 2010/11, and each month thereafter, until cancelled by me.

Please escalate this debit order by 10% each year. Yes No

Type of Account Current Savings Transmission

Bank Name Branch Name

Branch Code Account No.

Date Signature

I/We acknowledge that the party hereby authorised to effect the drawings against my/our account may not cede or assign any of its rights to any third party without my/our prior written consent and that I/we may not delegate any of my/our obligations in terms of this contract/authority to any third party without prior written consent of the authorised party.

Please complete this section for a monthly donation by CREDIT CARD

Please debit my/our Mastercard VisaCard monthly in the amount of R..... until cancelled by me/us.

Card no.

Last 3 digits on back of card Expiry date

Signature

Please use these details to add LITTLE EDEN to your Internet banking monthly beneficiaries

Bank: First National
Account no. 546 809 28009
Branch: Karaglen
Branch code 252 442

(Please use your company name as the beneficiary reference.)