

DONATION FORM

(Please fill the form in BLOCK letters and send it to us with your instrument of donation)

1. Your Name _____

2. Your Address _____

3. Your E-mail Address _____

4. Your Telephone No. _____

5. Your Organisation, if any _____

6. Your Occupation _____

7. Demand Draft/Cheque No. _____

Drawn on _____

8. Special Instructions, if any _____

9. Do You Wish to Remain Anonymous Yes/No (please tick your option)

Your Signature