DIRECT DEBIT AUTHORISATION FORM

Please complete PART 1 of the form and mail it to:
YMCA of Singapore, One Orchard Road, Singapore 238824 Attn: Finance Department

PART 1: FOR SUPPORTER'S COMPLETION

*Please tick the boxes ☐ accordingly.

☐ I would like to contribute to (Event: _____) with the amount of S$_____.

☐ I would like to make a **general contribution** to YMCA of Singapore with the amount of S$_____.

☐ I would like to contribute **monthly** to YMCA of Singapore with the amount of S$_____.

Full Name (Mr/Mrs/Ms/Mdm/Dr) / Company's Name: _____

NRIC/FIN/ROC/ROB No.: _____ Email: _____

Address: _____

Contact No: _____ (HP) _____ (Home) _____ (Office)

IRAS Tax Exemption: Yes / No

By GIRO		
Name of bank: _____ **Branch:** _____ **Name(s) as in bank record:** _____ _____ **Bank account number:** _____ **Deduction period: From** _____ **(mth/yr) to** _____ **(mth/yr)** **Name of billing organisation: YMCA of Singapore**	• **I/We hereby instruct you to process YMCA of Singapore's instructions to debit my/our account.** • **You are entitled to reject YMCA of Singapore debit instructions if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.** • **This authorisation will remain in force throughout the deduction period stated, or until it is terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through YMCA of Singapore.** *Please allow four to eight weeks for processing.*	**Thumbprint(s)/Signature(s)** **As in bank record** **Please go to the branch with your identification for thumbprint** **Date**

Your kind contribution towards YMCA is greatly appreciated. We will like to acknowledge your contribution in our publications.

☐ **do check this box if you do not wish to be acknowledged in this manner.**

PART 2: FOR BANK / FINANACIAL INSTITUTION'S COMPLETION

To: YMCA of Singapore, 1 Orchard Road, Singapore 238824

This Application is hereby APPROVED / REJECTED (please tick) for the following reason (s):

☐ Signature/ Thumbprint differs from financial institution's records ☐ Wrong account number

☐ Signature/ Thumbprint incomplete / unclear ☐ Others: _____

_____ _____ _____

Name of Approving Officer Authorised Signature Date

PART 3: FOR YMCA OF SINGAPORE'S COMPLETION

Bank	Branch	YMCA of Singapore's Bank Account No	Donor Reference No :
7214	011	0666098005	

Date Received: _____ Processed Date: _____ Tax Receipt No.: _____

developing body, mind & spirit