

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 make a **monthly** to YMCA of Singapore with the amount of S\$ _____

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

NRIC/FIN/UEN 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 organization: YMCA of Singapore	*I/We hereby instruct to process YMCA of Singapore's instruction 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 authorization 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. <i>Please allow four to eight weeks for processing</i>	Thumbprint(s)/Signature(s) As in bank record Please go to the branch with your identification for thumbprint Date
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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/FINANCIAL 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's Reference No:
7171	100	1009040106	

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

**This donation is tax deductible for donation S\$50 and above. The deduction will be automatically included if you have provided your Tax Reference number (e.g. NRIC/FIN/UEN).

By filling up this form, I consent to allow Young Men's Christian Association of Singapore (YMCA) to collect, use, disclose my personal data in order to process, administer, facilitate, maintain and/or manage my relationship with YMCA as a member, donor, volunteer, program participant, beneficiary, including communications on YMCA's activities, programs and services and donation requests; carrying out research, analysis and development activities for YMCA's purposes; and making disclosures required by law or a competent authority. YMCA may disclose my personal data to its third party service providers and/or agents, which may be sited outside of Singapore (subject always to requirements under applicable law having been met).