

DONATION FORM



FULL NAME: COMPANY/MR/MS:

ADDRESS:

TEL: (H/P)

(H)

(O)

Email:

I WOULD LIKE TO CONTRIBUTE TO ' BUILDING LIVES.... RAISING HOPE!!'

MAKE A DONATION

- A one-off donation of RM _____
- Sponsor rental of premise @ RM3000 p/month for _____ month(s).

SPONSOR A CHILD

For Intervention program for 1 year.

- An annual contribution of Rm 4200
- Monthly contribution of RM 350 for 12 months

SPONSOR THERAPY SESSION

Occupational therapy

- An annual contribution of RM 4000
- Monthly contribution of RM 320 for 12 months

- Attached, my cheque No. _____
- I will bank in directly to your account.
- Pls send receipt to my address/email/ WhatsApp to me. (Pls circle)
- I do not require a receipt.

Pls email or WhatsApp to us @

PERSATUAN KEBAJIKAN SRI EDEN SELANGOR DAN KUALA LUMPUR
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