



63A Chartwell Drive, Singapore 558758, Tel 6280 6076

PERSONAL PARTICULARS			
Name: Dr/Mr/Mrs/Miss	NRIC/FIN No.:		Gender:
Address:	Mobile No.:	Office No:	Home No.:

I WOULD LIKE TO MAKE A ONE-TIME DONATION
<input type="checkbox"/> One-time
Amount: <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$500 <input type="checkbox"/> \$1000 <input type="checkbox"/> Other amount: \$_____
Via: <input type="checkbox"/> Cheque/Money Order No.: _____ <input type="checkbox"/> I Intend to transfer funds via internet banking* <i>Please see notes below</i>

I WOULD LIKE TO MAKE A MONTHLY PLEDGE
<input type="checkbox"/> Monthly (From _____ to _____) Period of _____ months <small>dd/mm/yy dd/mm/yy</small>
Amount: <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> \$30 <input type="checkbox"/> \$500 <input type="checkbox"/> \$100 <input type="checkbox"/> Other amount: \$_____
Via: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Money Order <input type="checkbox"/> Bank Standing Order <input type="checkbox"/> GIRO (Form attached) <input type="checkbox"/> I Intend to transfer funds via internet banking* <i>Please see notes below</i>
<ul style="list-style-type: none"> o Please make cheque, money order & bank standing order payable to “Church of St. Francis Xavier” o For GIRO application, please fill in Interbank GIRO application form attached. <p>* For Bank Standing Order/Interbank Transfer & GIRO, kindly credit money to our DBS Bank Account Number 7171-047-9036970. Indicate your full name when making transfer.</p>

IMPORTANT PDPA NOTICE:
<p>The Church of St. Francis Xavier (“the Church”) safeguards all personal data collected through any ministry, parish, commission, or activity, in accordance with the Singapore Personal Data Protection Act 2012 (“PDPA”).</p> <p>In compliance with the PDPA and by signing this form, I agree and consent to the collection, receipt, processing, disclosure, storage and use of all my personal data and all such data submitted to the Church for the purpose of processing and administration of the abovementioned.</p>



APPLICATION FORM FOR INTERBANK GIRO

Part 1: FOR APPLICANT'S COMPLETION

Date: (DD/MM/YY)	Name of Billing Organisation ("BO"): Church of St. Francis Xavier
To: (Name of Bank)	Name(s) as in Bank Account:
Branch Name:	Donor Reference No.: <i>(for church use)</i>
<ul style="list-style-type: none"> I/We hereby instruct you to process Church of St. Francis Xavier's instruction to debit my/our account. You are entitled to reject this debt instruction 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 until terminated by your written notice sent to my/our address last known to you, upon receipt of my/our written revocation or upon your receipt of the notice of expiry through Church of St. Francis Xavier. 	
My/Our Name(s) as in Bank's record:	My/Our Contact (Tel/Fax) Number(s):
My/Our Account Number:	Donor(s)' Signature(s)/Thumbprint(s):*

Part 2: FOR CHURCH OF ST. FRANCIS XAVIER'S COMPLETION

Bank	Branch	SFX Account No.
7 1 7 1	0 4 7	9 0 3 6 9 7 0
Bank	Branch	Account No. to be debited

Donor Reference No.:

Part 3: FOR BANK'S COMPLETION

To: Church of St. Francis Xavier

The Direct Debit Authorisation in respect of the above-mentioned account is hereby **REJECTED** (please tick) for the following reason(s):

Signature/thumbprint* differs from the Bank's records
 Signature/thumbprint* incomplete/unclear
 Account operated by signature/thumbprint*
 Wrong account number
 Amendment not countersigned by customer
 Others: _____

Name of Approving Officer:	Authorised Signature:	Date:
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For thumbprints, please go to the branch with your identification.

* Please delete where inapplicable.