

Your contribution to the Redemptorist Fathers Maintenance Fund will ensure that the New Novena Shrine Church continues to be a focal point of worship, devotion and spiritual formation for our congregation, visitors and pilgrims.

PERSONAL PARTICULARS

Name: Dr/Mr/Mrs/Mdm/Miss _____	NRIC/FIN No.: _____	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Address: _____ _____	Mobile No.: _____	Office No.: _____	Home No.: _____

MY GIFT TO REDEMPTORIST FATHERS MAINTENANCE FUND

- I want to donate \$ _____ as a new monthly donation.
- I want to upgrade/increase my monthly donation from \$ _____ to \$ _____
- I want to make a one-time donation of \$ _____

INTERBANK GIRO

To (Name of Bank): _____
Name(s) as in Bank's record: _____
Bank Account No.: _____
Signature(s)/thumbprint(s): <i>For thumbprints, please go to the branch with your identification</i>
<p>a) I/We hereby instruct the Bank to process Redemptorist Fathers Maintenance Fund instructions to debit my/our account.</p> <p>b) The Bank is entitled to reject the Redemptorist Fathers Maintenance Fund debit instruction if my/our account do/does not have sufficient funds and charge me/us a fee for doing so. The Bank may also at its discretion, allow the debit even if this results in an overdraft on the account and impose charges accordingly.</p> <p>c) This authorization will remain in force until</p> <p>i) upon the Bank's written notice sent to my/our address last known to the Bank;</p> <p>ii) upon the Bank's receipt of my/our written revocation; or</p> <p>iii) upon the Bank's receipt of the notice of expiry from the Redemptorist Fathers Maintenance Fund.</p>

CREDIT CARD

Please debit my card: <input type="checkbox"/> VISA <input type="checkbox"/> Mastercard	
Name on card: _____	
Card No.: _____	CVW _____
Expiry Date: _____	
Signature: _____	

CHEQUE/MONEY ORDER

I enclose

Cheque No.: _____

Money Order No.: _____

made payable to Redemptorist Fathers Maintenance Fund

FOR REDEMPTORIST FATHERS MAINTENANCE FUND

SWIFT BIC	BO's Account No.	SWIFT BIC	Account No. to be debited	Donor's Ref No.
UOVB SG SG XXX	4 5 1 3 0 3 5 3 2 7			

FOR BANK'S COMPLETION

To: Redemptorist Fathers Maintenance Fund
300 Thomson Road
Singapore 307653.

Attn: Officer-in-charge

This application is hereby REJECTED (please tick) for the following reason(s)

Signature/thumbprint # differs from Bank's records Wrong account Number

Signature/thumbprint # incomplete/unclear Amendments not countersigned by customer

Account operated by Signature/thumbprint # Others: _____

Name of Approving Officer _____ Authorized Signature _____ Date _____

Please delete where inapplicable