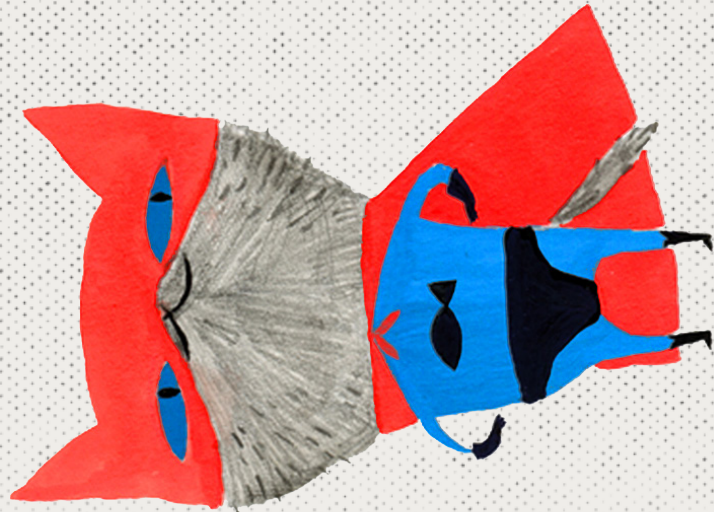


**BECOME A  
CAT  
SUPERHERO  
AND SAVE LIVES  
EVERYDAY!**



**ARE YOU AN AVENGER OR A CIVILIAN?  
EVERY DOLLAR COUNTS, BECOME A  
CAT SUPERHERO TODAY.**  
[www.catwelfare.org](http://www.catwelfare.org)



Affix stamp here.

**CAT WELFARE SOCIETY**  
Orchard Road P.O. Box 65  
Singapore 912303

DO NOT STAPLE

DO NOT STAPLE

**THE CAT WELFARE SOCIETY (CWS) IS A REGISTERED CHARITY WITH IPC STATUS. ESTABLISHED IN 1999, CWS STRONGLY BELIEVES IN THE HUMANE MANAGEMENT OF OUR COMMUNITY CAT POPULATION THROUGH EDUCATION AND ULTIMATELY, STERILISATION NOT DESTRUCTION.**

We are not funded by the government and all our funding over the years have been sourced on our own and through the kindness and generosity of our donors and supporters. Your donation will provide us with critical funds to sustain our operations which include sterilisation, medical aid, assistance for low income families, education outreach as well as rehoming of cats.

CWS accepts donations via interbank GIRO where donors can give a standing instruction to their bank to deduct a fixed sum of money every month to be paid to CWS.



**WE SINCERELY THANK YOU FOR YOUR SUPPORT**





# DONATION APPLICATION FORM

## PART 1: FOR APPLICANT'S COMPLETION

PLEASE GLUE AND SEAL HERE

PLEASE GLUE AND SEAL HERE

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Contact No: \_\_\_\_\_ NRIC: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Email: \_\_\_\_\_ Gender: \_\_\_\_\_

### DONATIONS ARE TAX-EXEMPTED

Please note: For existing donors who are contributing on a monthly basis, this application will be treated as additional contributions. #Please indicate your NRIC / FIN number so that your donation will automatically be included in your tax assessment by IRAS. Hence, we will not be issuing tax-deductible receipts for such donations. Please fill in your complete particulars to facilitate the auto-inclusion.

**NOTE:** By providing the information set out in this form, I/we agree and consent to Cat Welfare Society, as well as its representatives and agents (collectively, "CWS") collecting, using, disclosing and sharing amongst themselves my/our personal data provided above as well as in the records of CWS from time to time, and disclosing such personal data to CWS's authorised service providers, and relevant third parties for purposes reasonably required by CWS to process my donation to CWS. Such purposes are set out in the Data Protection Policy (<https://www.pdpc.gov.sg/legislation-and-guidelines/overview>) which I/we confirm I/we have read and understood.

Tick here if you DO NOT wish to be contacted by CWS to receive information about future fund-raising campaigns, volunteer recruitment or other events.

please fold here second

### I WANT TO PROTECT INNOCENT CATS! PLEASE HELP ME MAKE A MONTHLY CONTRIBUTION OF:

- \$10 (Cat Buddy)  \$30 (Cat Defender)  \$50 (Cat Avenger)  \$100 (Cat Guardian)  \$200 (Cat Crusader)  
 \$500 (Cat Superhero)  OTHER AMOUNT:

### FOR DONATION VIA INTERBANK GIRO:

Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_  
 Name of Donor: \_\_\_\_\_ Donor's  
 (As per Bank Records) \_\_\_\_\_ A/C No: \_\_\_\_\_  
 Name of Billing Organisation: Cat Welfare Society  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (As per Bank Records)

- I/We hereby instruct you to process CWS's instructions to debit my/our account.
- You are entitled to reject CWS's 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 until it is terminated by my written notice sent to CWS.

please fold here first

## PART 2: FOR CAT WELFARE SOCIETY'S OFFICIAL USE

Bank	Branch	Cat Welfare Society's A/C No:
7 1 7 1 0 6 5	0 1 3 5 0 7 8	
Bank	Branch	Account No:
Billing Organisation's Customer Ref. No.		

## PART 3: FOR BANK'S OFFICIAL USE ONLY

### TO BILLING ORGANISATION

This application is hereby REJECTED (please tick)  
 FOR THE FOLLOWING REASON(S):

- Signature / Thumbprint\* differs from Financial Institution's records  
 Account operated by Signature / Thumbprint\*  
 Amendments not countersigned by customer  
 Signature / Thumbprint\* incomplete / unclear\*  
 Wrong account number  
 Others: \_\_\_\_\_

\*Please delete where inapplicable

Name of Approving Officer: \_\_\_\_\_

Authorised Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PLEASE GLUE AND SEAL HERE

PLEASE GLUE AND SEAL HERE

