Sponsor Registration

Full Name:
Gender:
Marital Status:
Email:
Contact:
Region of Residency:
District of Residency:
Ward:
Village:
Street:
Postcode:
House No:
NIDA:
Guarantor Name:
Guarantor Location:
Guarantor Contact:

Payment Information

Payment Method: Bank Transfer

Account Number: 233333333333

Account Holder Name: vddd

Amount: \$400000

Protection Letter

Dear Sponsor,
We are committed to ensuring the safety and well-being of the children
[Your Name]
[Your Title]
[Your Organization's Name]
[Contact Information]
[Website URL]
Acknowledgment of Agreement
I, , have read and understood the terms of the Child Sponsorship Protection Agreement. I agree to
the terms stated above.
Signature:
Date:

Endorsement Letter

Dear Sponsor,
Thank you for your generosity. Your support will have a significant impact