

The ASD Sponsorship Program



Yes, I want to sponsor an ASD Dog!

To become a sponsor today, simply fill out this form and send it with your check or complete GIRO particulars to the address above. Please allow 4 to 8 weeks for your sponsorship papers to be processed. Thank you!

The GIRO Administrator
3 Jambol Place
Singapore 119330

**PLEASE DO NOT USE CORRECTION FLUID.
FOR CORRECTIONS, PLEASE CANCEL AND COUNTERSIGN**

Date of Application ____/____/20____ (Day/Month/Year)

Name of sponsor _____ Add _____

Tel _____ (H) _____ (HP) E-mail _____

Name of dog to be sponsored: _____ Name you wish to appear on the sponsorship certificate: _____

Please note that every sponsorship has a minimum period of 6 months. The minimum sponsorship amount is \$35.

Payment Method

- ☐ Check enclosed for \$_____, payable to: **Action For Singapore Dogs Society**
- ☐ I wish to make monthly Interbank GIRO contributions in the amount indicated with tick () below:
 * ☐ \$35 ☐ \$40 ☐ \$45 ☐ \$50 ☐ \$70 ☐ Other Amount \$_____

GIRO sponsorship particulars

Name of Billing Organization ("BO"): **ACTION FOR SINGAPORE DOGS SOCIETY**

*TO: Name of applicant's bank: _____ Branch: _____

- (a) I/We hereby instruct you to process the BO's debit instructions to debit my/our account.
 (b) You are entitled to reject the BO'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.
 (c) This authorization will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through the BO.

Applicant's Name as shown in Bank records _____
 (please underline surname)

Applicant's Bank Account No. _____ Applicant's NRIC/FIN/Passport No. _____

PLEASE CHECK THAT YOUR SIGNATURE IS IDENTICAL TO ONE IN YOUR BANK ACCOUNT

* _____ Date ____/____/____
 My/Our Signature/Thumbprint month / year
 (My/Our Signature(s)/Thumbprint(s): please go to the branch with your identification)

For Billing Organization's Completion

Bank	Branch	B.O. Account No.
7 3 3 9	6 5 0	3 2 2 4 5 6 0 0 1

Bank	Branch	Account No. to be Debited	B.O.'s Applicant's Ref No.

For Financial Institution's Completion

TO: ACTION FOR SINGAPORE DOGS SOCIETY

This Application is hereby REJECTED (please tick) FOR THE FOLLOWING REASON(S): *Delete where applicable

- () Signature / Thumbprint *differs from Financial Institution's records () Wrong account number
 () Signature / Thumbprint *incomplete / unclear * () Amendments not countersigned by customer
 () Account operated by signature / thumbprint * () Others: _____

Name of Approving Officer: _____ Bank's Authorized Signature: _____