Contract Nr: _____

Yes! I want to make a difference!

DEBIT ORDER FORM

Kindly complete all the details in this form, sign and return to **admin@each1feeds1.org** or to fax nr **0866 524 289.**

A. Donation Details

I would like to make a donation via debit order to **Each1Feeds1 NPC (Reg nr: 2013/125349/08)** for the following

☐ Monthly ☐ Once-off amount of

☐ R4000 (10 boxes) ☐ R2000 (5 boxes) ☐ R1200 (3 boxes) ☐ R800 (2 boxes) ☐ R400 (1 box) or

☐ Other Amount:…… Starting month:…… Day of the month ☐ 1st ☐ 15th ☐ 28th

B. Contact Details

Please fill out all the details as it is required for the debit order collection

Title:……. Name:……..…… Surname:…….

D D M M Y Y

Date of Birth

If the donation is made by your business, then

Business Name: ……..……...…… Registration number :……..……..

Tel (Cell) :(……)…… ……. Tel (Alternative): (……)……..……...……

Email:…….

Address:……

…… Code: ……

C. Bank Details

Bank:…… Branch:……..…… Branch Code:……

Acc Holders Name

Account Number

☐ Cheque ☐ Savings ☐ Other

D: Mandate and Assignment

I hereby authorise Each1Feeds1 NPC to debit my bank account for the specified frequency for the above mentioned amount.
I understand my debit order will be processed through a system called NetCash / Sage Pay.

E: Cancellation

The authority of this debit order form may be cancelled by giving Each1Feeds1 NPC 30 (Thirty) days notice in writing by prepaid registered post or a signed fax. Please notify us immediately if any of your details should change.

…… ……..

Date Signature

Thanks indeed. Your donation is much appreciated and will make a big difference.

Tel: 012-9912894 Email: Admin@Each1Feeds1.org Fax: 0866524289