Hope for Children
www.hopeforchildren.org.au

AFAP

Sponsorship/donation form

Please complete the details requested below and return this form, together with your payment to: **AFAP (Hope for Children), PO Box 919, Claremont WA 6910.** AFAP will issue you with a tax deductible receipt.

Sponsor or donor details (please print)

Sponsor(s) or donor name(s): _____

Mailing address: _____

_____

Telephone: Home (____)_____ Mobile: _____

Email: _____

☐ I **do not** give permission for my/our name(s) to be used in a list of sponsors/donors
(Neither AFAP nor Hope for Children will share any personal details with any external parties without express permission.)

Sponsorship/donation amount

☐ **$400 pa** for each sponsored child to provide food, shelter and education
(Children require sponsorship up to the age of 18 years, however consent for continuing your sponsorship is sought each year)

☐ **Single Donation amount $** _____ to: ☐ general donations

☐ specific project _____
(please specify)

Payment options

☐I have enclosed a cheque (**made payable to AFAP**)

☐Please debit my: ☐Master Card ☐Visa Card

Card number: ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐

Expiry: ☐☐/☐☐ Amount: $ _____ Date: / /

Name on card: _____ Signature: _____

OFFICE USE ONLY

Date received: _____

Drawer: _____Bank: _____Amount: $ _____Cheque#: _____

Hope for Children Organization Australia Limited ACN 109 038 600
mail@hopeforchildren.org.au

The Australian Foundation for the Peoples of Asia and the Pacific Ltd
ABN 42 002 568 005