



I am
Bongani

Civil
Engineer

I am
↓↓↓
Ingane Yami

Pledge Card



Name: _____ Email Address: _____

Address: _____ Contact number: _____

Once off Donation of R _____ to be debited on _____ (Date)
(Complete bank details and sign below)

Monthly sponsorship

<input type="checkbox"/> Child	R1500 per month
<input type="checkbox"/> Mother	R3000 per month
<input type="checkbox"/> Other amount (specify)	R _____

DEBIT ORDER

I hereby instruct and authorise you to draw the sum of R _____ against my account with the below-mentioned Bank, commencing on the first day of _____ (Month and Year).

This authorisation may be cancelled by me/us by giving thirty days notice in writing.

Account Name _____ Bank _____

Branch Name + Code _____ Account Type _____

Account Number _____

All such withdrawals from my account by you, shall be treated as though they had been signed by me.

Signed at _____ on _____ day of _____ year _____

Name (please print) _____

Signature _____ (signature as used for signing cheques)

www.inganeyami.com Email: inganeyami@kloofharvest.co.za Telephone +27 31 764 2806

