



57B Pagoda Street Singapore 059216  
T: 62249373 E: contact@oogachaga.com

**APPLICATION FORM FOR GIRO DONATION**  
Please complete and mail to Oogachaga

Yes, I wish to support Oogachaga with a monthly donation of:

- \$20    \$50    \$100    \$ \_\_\_\_\_  
(please specify)

**MY PERSONAL PARTICULARS**

Name (in block letters please):  
(Dr/ Mr/ Ms/ Mrs/ Mdm/ Mx) #:

\_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Tel: (O/H) \_\_\_\_\_ (HP) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART 1: FOR DONOR'S COMPLETION**

Please fill in all fields.  
Incomplete forms will not be processed

Date: \_\_\_\_\_

To: (name of my bank) \_\_\_\_\_

Name & Address of Billing Organisation ("BO"):  
**OOGACHAGA, 57B Pagoda Street, S 059216**

- a) I/ We hereby instruct the Bank to process the BO's instructions to debit my/our account.
- b) The Bank is entitled to reject the BO's debit instruction if my/ our account does not have sufficient funds and charge me/ us a fee for this. The Bank may also at its discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- c) This authorisation will remain in force until the Bank's written notice sent to my/our address last known to the Bank; upon the Bank's receipt of my/our written revocation; or upon the Ban's receipt of the notice of expiry from the BO.

Name of Donor(s) (as indicated on Bank Account): \_\_\_\_\_

Account Number: \_\_\_\_\_

Donor's Signature/ Thumbprint^ (as per bank records): \_\_\_\_\_

**PART 2: FOR OOGACHAGA'S COMPLETION**

Bank			Branch			Billing Org Account No.							
7	1	7	1	0	1	1	9	0	1	4	5	9	8

Bank			Branch			Account No. to be debited							

Billing Organisation's Customer Ref. No.											

**PART 3: FOR BANK'S COMPLETION**

To: **Oogachaga, 57B Pagoda Street, S 059216**

This Application is hereby REJECTED (Please tick ✓) for the following reason (s):

- Signature/thumbprint# differs from Financial Institution's records
- Signature/thumbprint# incomplete/unclear#
- Account operated by signature/thumbprint#
- Wrong Account Number
- Amendments not countersigned by customer
- Others: \_\_\_\_\_

Name of Approving Officer: \_\_\_\_\_

Authorised Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Please delete where inapplicable  
^ For thumbprints, please go to the branch with ID