

# DONATE TO EDUCATE



In our efforts to continuously provide and improve our professional services to dyslexics in Singapore, we rely heavily on public donations to sustain our daily operations.

DAS provides more than **\$1 million** in bursaries every year and this figure is rising.

Without support from the generous people and organisations of Singapore, this support would not be possible.

Other ways to donate please scan this QR Code



## GIRO APPLICATION

PART 1: APPLICANT TO COMPLETE:

Billing Organisation: **DYSLEXIA ASSOCIATION OF SINGAPORE** Date:

Donor Details:		Donor Bank Details:	
Name (s):		Financial Institution:	
NRIC/FIN/ROC/UEN No.:		Account Name:	
Address:		Account Number:	
Contact No:		Donation Amount:	\$
Email:		Donation Frequency:	<b>MONTHLY</b>

- I/We hereby instruct you to process the Billing Organisation's instructions to debit my/our account.
- You are entitled to reject the Billing Organisation's debit instruction 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 charge accordingly.
- This authorisation 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 Billing Organisation.

Signature(s):

Part 2: For the Billing Organisation's Completion

SWIFT BIC	Billing Organisation's Account No.	Billing Organisation's Customer Ref. No.
OCBCSGSGXXX	5 0 1 8 5 4 4 1 8 0 0 1	
SWIFT BIC	Account Number to be Debited	

Part 3: For Financial Institution's Completion

To: Dyslexia Association of Singapore, 1 Jurong West Central 2, #05-01 Jurong Point, Singapore 648886

This Application is hereby REJECTED (please tick) for the following reasons (s):

- |  |   |
|--|---|
| <input type="checkbox"/> Signature/Thumbprint* differed from Financial Institution's records | <input type="checkbox"/> Signature/Thumbprint* is incomplete or unclear |
| <input type="checkbox"/> Account operated by Signature/Thumbprint*                           | <input type="checkbox"/> Amendments not countersigned by applicant      |
| <input type="checkbox"/> Wrong Account Number  | <input type="checkbox"/> Other: _____                                   |

\* Delete where applicable

Name of Approving Officer

Authorised Signature and Stamp of Financial Institution

Date

### MONTHLY DONATION BY GIRO

Please complete the **GIRO APPLICATION FORM** and indicate your monthly donation amount.

### ONE TIME DONATION BY CHEQUE:

Please make the cheque out to:  
"Dyslexia Association of Singapore"

### OTHER WAYS TO DONATE:

[das.org.sg/about-das/donate-to-das](http://das.org.sg/about-das/donate-to-das)

### SEND THE COMPLETED FORM TO:

Dyslexia Association of Singapore  
1 Jurong West Central 2  
#05-01 Jurong Point  
Singapore 648886

Kindly include your full name and NRIC/FIN to facilitate with tax exemption.