



Sponsor a Child  
make a difference



# DEBIT ORDER

Child name (indicate name of sponsored child): \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

Postal address: \_\_\_\_\_

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

Do you require a Section 18A tax-certificate? YES: \_\_\_\_\_ NO: \_\_\_\_\_ If YES, please complete Annexure A

TO: BANKSERV

Dear Sir/Madam

My/Our agreement dated: \_\_\_\_\_

My/Our banking details are as follows:

NAME OF ACCOUNT HOLDER: \_\_\_\_\_

BANK: \_\_\_\_\_ BRANCH CODE: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ ACCOUNT TYPE: \_\_\_\_\_

I/we hereby request and grant permission to debit the above-mentioned bank account with R \_\_\_\_\_ (amount in words:) \_\_\_\_\_ in favour of Abraham Kriel Children's Home Potchefstroom, in respect of the Sponsor-A-Child project on a monthly basis on the 1<sup>st</sup> / 5<sup>th</sup> / 15<sup>th</sup> (please circle desired date) day of each month starting from \_\_\_\_\_ 20\_\_\_\_\_. All such withdrawals from my/our bank account(s) by you will be handled as if personally signed off.

I/we understand that this transaction as authorised, will be processed by a system known as Bankserv and I/we also understand that all the details of each transaction will be printed on my/our bank statement(s). I/we agree to cover the bank costs linked with this transaction. This agreement may be cancelled by me/us by providing written 30 days' notice. But I/we fully understand that we are not entitled to a refund until the cancellation is in full effect. I/we acknowledge that the party authorised to perform this transaction against my account may not yield any of their rights to a third party or cede without my/our written consent (obtained beforehand), and that I/we are prohibited from delegating any of our obligations pertaining to this agreement to third parties without the necessary written consent from the authoritative party. I/we confirm that I/we have read this declaration and understands the contents thereof.

SIGNED AT: \_\_\_\_\_ ON THIS: \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
BANK AUTHORISED SIGNATORY

\_\_\_\_\_  
ASSISTED BY: (2<sup>nd</sup> SIGNATORY)  
Where applicable

## Annexure A

Please provide the following information that are required to be included on the Section 18A certificate as per Government Gazette No 48104 dated 24 February 2023:

1. Donor nature of person (please select 1 option below)

Natural Person		Priv Cpy		Public Cpy		CC	
Trust		Partnership		Other	Specify:		

2. Donor identification type

Identity doc		Cpy/CC Reg		Trust Reg		Other	
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Country of issue (In case of natural person): \_\_\_\_\_

3. Identification or Registration number of donor: \_\_\_\_\_

4. Income tax reference number of the donor: \_\_\_\_\_

5. Contact number of the donor: \_\_\_\_\_

6. Electronic email address of donor: \_\_\_\_\_

7. Name or Registered name of donor:

\_\_\_\_\_

8. Trading name of the donor (if different from registered name)

\_\_\_\_\_

SIGNED AT: \_\_\_\_\_ ON THIS: \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
BANK AUTHORISED SIGNATORY

\_\_\_\_\_  
ASSISTED BY: (2<sup>nd</sup> SIGNATORY)  
Where applicable