SHELTER Charity Climb 2017

THE CAUSE. THE CLIMB. THE EXPERIENCE.

Every step you climb helps underprivileged kids to reach new heights!

Mount Kinabalu | 28 July–1 August 2017

Dear Friends,

SHELTER hopes to raise RM200,000 from the SHELTER Charity Climb 2017, to be channelled toward education for the underprivileged, abused, neglected or abandoned children in our homes. On behalf of all our children, SHELTER thanks you for your kind support in meeting the needs of our children through your partnership in giving to SHELTER Charity Climb 2017.

*Please address your cheques to: **SHELTER**. Only contributions above RM50 will be issued with an official receipt, and are tax deductible. Thank you.*

DONOR'S PARTICULARS

I would like to participate in giving to SHELTER Charity Climb 2017 to help Shelter Home kids be overcomers.
(Please ensure name is as per I.C. and address is written legibly)

NAME AS PER I.C.: ..... I.C. NO.: .....

ADDRESS: .....

.....

..... POSTCODE: .....

EMAIL: ..... TEL (H/0): ..... H/P: .....

MY DONATION. Please tick and complete accordingly.

- ❑ I would like to donate toward the SHELTER Charity Climb 2017: RM .....
- ❑ I would like to sponsor part/full RM2,900 for an ex-SHELTER kid to climb Mount Kinabalu on Shelter Charity Climb 2017: RM .....
- ❑ I would like to partner an ex-SHELTER kid who wants to raise RM100,000 for Shelter Charity Climb 2017: RM .....
- ❑ I would like to make a donation to SHELTER as part of our company's CSR programme: RM .....
- ❑ I would like to make a donation to meet SHELTER's other needs (e.g. Community Food Aid / Financial Aid): RM _____

TOTAL PAYABLE: RM _____

PAYMENT DETAILS

❑ **Payment by Cheque**
Cheque/Bank Draft/Money Order favouring: **SHELTER**
No.: .....

❑ **Payment via Bank ATM / Online Transfer**
Bank Account No.: **Standard Chartered Bank | 7941 4513 1406**
Please submit ATM/online transaction slip with this form to: **office@shelterhome.org**

❑ **Payment by Credit Card** ❑ Visa ❑ Mastercard ❑ Amex

Card No.: | | | | | | | | | | | | | | | | CVV No.: | | | Expiry Date: | | |

Cardholder's Name: .....

I Authorise Payment of RM: ..... Cardholder's Signature: .....

SHELTER Home for children

SHELTER HOME FOR CHILDREN
P.O. Box 23, Jalan Sultan, 46700 Petaling Jaya, Selangor D.E., Malaysia
t +603-7955 0663 | f +603-7956 3940 | e office@shelterhome.org
w www.shelterhome.org | fb facebook.com/ShelterHomeMY

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DONOR'S SIGNATURE