



新加坡基督徒愛老院  
SINGAPORE CHRISTIAN HOME  
SINGAPORE CHRISTIAN HOME  
DONATION FORM

Mr/Mdm/Ms/Rev/Dr/Prof (Please delete where inapplicable)

Name: \_\_\_\_\_ NRIC/FIN No.: \_\_\_\_\_

Organisation/Name: \_\_\_\_\_

ROB/ROC No: \_\_\_\_\_

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

\_\_\_\_\_ (S )

Home: \_\_\_\_\_

Office: \_\_\_\_\_

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

Fax: \_\_\_\_\_

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

Amount: \_\_\_\_\_

Mode of Payment : \_\_\_\_\_

**For cheque donation, kindly make it payable to "Singapore Christian Home" and post it to:  
Singapore Christian Home, 20 Sembawang Crescent, Singapore 757092.**

Wish to claim tax benefit? YES  NO

By submitting this form, I consent that Singapore Christian Home collects, uses, and discloses and stores my personal data for purposes related to donor management, such as submission to Inland Revenue Authority of Singapore for tax deduction, and contacting me about events and other SCH activities. I may withdraw consent by emailing [supportus@schome.org.sg](mailto:supportus@schome.org.sg).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Further enquiries, please contact us at 6831 5161 or [supportus@scheme.org.sg](mailto:supportus@scheme.org.sg).**