

Please send your form to:
Community Partnership (Division of Community Outreach & Philanthropy)
 11 Hospital Drive | Singapore 169610
 Tel: +65 62369440 | Email : donate@nccs.com.sg
 Web: www.nccs.com.sg

My Particulars (Please tick (✓) where applicable)

Individual Donation **Corporate Donation** (Please specify name of contact)

Full Name (Please underline surname) Dr/Mr/Mrs/Ms: _____

NRIC/FIN/UEN No: _____ (For tax deduction)

Date of Birth: _____ Email: _____

Company: _____ Designation: _____

Address: _____ Postal code: _____

Mobile: _____ Office No.: _____

Tax-Deduction Clause

All donations received are managed by NCCS Cancer Fund, part of SingHealth Fund (SHF), an Institution of Public Character (UEN 201624016E). All donors are required to provide their Tax Reference number (e.g. NRIC/FIN/UEN where applicable) to enjoy tax deduction. The donation will be automatically included in the donor's IRAS tax assessment. As such, we will not be sending any official receipt, unless upon written request by the donor.

I would like to make a

One-Time Donation **Monthly Donation** (Please specify)

Amount: S\$10 S\$25 S\$50 S\$ _____ (please specify amount)

My Donation Via Cheque

By Cheque No.: _____ (Please make cheque payable to: "NCCS Cancer Fund")

Name of bank: _____

Please Note:

- 1) All outright donations qualify for 250% tax deduction.
- 2) Donations must reach NCCS before 15th December for processing and be included in time for tax assessment in the same year.
- 3) Please return the original copy of this form with all required details including the Personal Data Protection consent below.

DONOR CONSENT FOR COLLECTION AND USE OF PERSONAL INFORMATION

Personal Data Protection

By providing my particulars as requested in this form, I, the Donor understand and acknowledge that I am deemed to have given consent to the relevant SingHealth organisations and their successors or assigns (collectively 'Organisations' as detailed in the SingHealth Data Protection Policy) collecting, using and/or disclosing my personal data, and disclosing my personal data to each other (as may be necessary) for the purpose of processing my donations and such other reasonably related purposes as may be set out in the SingHealth Data Protection Policy available at www.singhealth.com.sg/pdpa.

In addition:

- By ticking this box, I agree to any of the SingHealth Organizations sending me information and/or contacting me via voice call or SMS on their fundraising campaigns, volunteer recruitment, social outreach and other related topics and events. I confirm and agree that my consents granted herein do not supersede or replace any other consents which I may have previously provided to each of the Organisations in respect of my personal data, and are additional to any rights which the Organisations may each individually have at law to collect, use or disclose my personal data.
- By ticking this box, I wish to remain anonymous and my personal data/donation should not be published or recognised in any form.

