


Celebrate 25 Years of Empowerment with MDAS
DONATION FORM for MDAS 25th Anniversary Charity Dinner

<input type="checkbox"/> I / We would like to book the following table:			
Table Tier	Table Price [10 seats]	No. of table(s)	Total amount
Platinum Table	\$10,000		
Gold Table	\$8,000		
Silver Table	\$5,000		
Individual Seating			
No. of seats: (\$500 per seat)	_____ seat(s)	Please indicate if you have any special dietary requirements	Halal: _____
Total amount:	\$ _____		Vegetarian: _____

<input type="checkbox"/> I am unable to attend and would like to sponsor* an MDAS beneficiary to the dinner		
No. of beneficiary: _____	\$500 per beneficiary	Total amount: _____

<input type="checkbox"/> I am unable to attend and would like to make a Direct Donation* of:					
<input type="checkbox"/> \$20,000	<input type="checkbox"/> \$10,000	<input type="checkbox"/> \$5,000	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$500	<input type="checkbox"/> Other amount: _____

**Donations \$50 and above are applicable for a 250% tax exemption.*

Modes of Donation	
<input type="checkbox"/> Credit Card Online <i>(This Donation Form will still be required if you donate via Give.asia)</i>	For online donation: https://give.asia/mdas-25th-anniversary or scan the QR code on the right. Please forward Give.asia acknowledgement email to us at projects@mdas.org.sg with this donation form. <div style="text-align: right; margin-top: 10px;">  </div>
<input type="checkbox"/> Cheque - Cheque no: _____	Please issue a cheque payable to: MDAS Mail this Donation Form together with the cheque to: 9 Bishan Place #06-04 Junction 8 Singapore 579837
<input type="checkbox"/> PayNow to UEN	PayNow to our UEN No: T00SS0094D Please input your full name in the remarks. Email projects@mdas.org.sg with this donation form.

For enquiries, please email to projects@mdas.org.sg or call 6259 6933.

Personal Particulars (for donors giving by cheque only)
Full Name (as shown on NRIC)/Company Name: _____
Address: _____
Postal Code: _____ Email: _____
Contact Person: _____ Contact Number: _____

Donations of \$50 and above are eligible for a 250% auto tax exemption (Provide NRIC/FIN/UEN below)
NRIC/FIN/UEN: _____ (Full NRIC No. Required) <input type="checkbox"/> <i>I would require a physical copy of my tax-deductible receipt</i>
The data collated from this form will solely be used by MDAS to administer the donation details. With the submission of the registration form, you are agreeable to share your personal data with MDAS and receive information in connection to MDAS. This is in conjunction with PDPA. <input type="checkbox"/> <i>Tick here if you do not wish to receive updates or be part of our mailing list. You may also email us at communityrelations@mdas.org.sg for more enquiries.</i>

***If a donation is received after the campaign period, it shall be placed under MDAS general donation.*