

Debit Order Form



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Private Bag X03
Lynnwood Ridge 0040
Finance.ZA@om.org

I/We, _____ (title, full name and surname of donor)

Hereby authorize that the amount specified below be transferred from my bank account specified below to the bank account of **OM South Africa, account number 331947331, Standard Bank, Hatfield branch, branch code 051001**, for the support of the OMer / OM ministry / OM field / OM project detailed below. This arrangement will remain valid until the End Date specified below, or until I recall it in writing by sending an email to Finance.ZA@om.org.

Name of Recipient, Project, OM Country I wish to support:

										Name, Surname of OMer/Ministry/Field/Project									
Petra code										Kindly insert Petra code if it is available									

Donor Personal Details:

Postal Address:									
Tel. no.:					Cell.no.:				
E-mail:									

Donor bank account details (no Credit Cards):

Account type(kindly mark by X):		Current/Cheque			Savings			Transmission		
Bank name:				Branch Name/Code:						
Account number:				Account name:						
Amount per month (ZAR):										
Debit Order start month & Year:**				Start Date (kindly mark by X):			1 st		16 th	
Debit Order end date (Day, Month & Year):				Or Until further notice(kindly mark by X):						
To keep pace with inflation please automatically increase the amount of this debit order annually on the anniversary of the start										
Date by (kindly mark by X):		0.00%	5.00%	10.00%			Other % (specify %)			
If this Debit Order Form reaches the OM Office too late to meet the Debit Order Start Date, I authorize you to extend the Debit Order End Date with a corresponding time period (kindly mark your choice by X) <input type="checkbox"/> Yes <input type="checkbox"/> No										
** Completed Debit Order Forms must reach OM Office by no later than the 14 days prior to the Debit Order Start Month										

Communication

I would like to receive the OM South Africa newsletter by email (kindly mark by X): Yes No

Permission to use and process my ⁱPersonal information

By signing this consent form, I hereby voluntarily and expressly consent to and authorize **Operation Mobilisation South Africa NPC** to process my personal information, provided above, into their database and where applicable process my Personal Information by way of the trans-border flow of information, when Personal Information is sent to relevant OM office in the country where the recipient or project is based.

I understand that I have the right to change or correct my Personal Information by giving notice to **OM South Africa**. I also have the right to revoke this consent at any time by written notice to **OM South Africa**. Revoked consent is not retroactive and will not affect any disclosure already made.

ⁱThe term "Personal Information" and "process" shall have the meaning prescribed in the POPI Act.

Date

Signature