



Sponsorship Form

Name		
Address		
State		Postcode
Email		
Telephone		
How did you hear about Fiji Kids?		
What has motivated you to sponsor a child?		

Name of selected child	
Name of 2 nd child (if more than one)	
I would like to commence regular payments from (dd/mm/yyyy)	
Your Signature	
Today's Date (dd/mm/yyyy)	

Contributions can be made by monthly scheduled payment via your bank. We will be in touch to confirm sponsorship of your child and to provide bank details when we receive this form.

Please email the completed form to info@fijikids.org

