

Acceptance of Sponsorship

Please check where applicable and send the duly signed form to:

Tübinger Syrienhilfe e.V.

Viktor-Renner-Str. 67

72074 Tübingen (Germany)

Contact Information:

Name/s:

Address:

Phone:

E-mail:

I / We take on a sponsorship for (number) Syrian war orphan/s.¹ The annual contribution for one sponsorship is 180 euros, or 15 euros a month.

I / We will pay the contribution for my sponsorship/s (please check your preference)

() on a semi-annual basis of 90 euros (due January 31st and July 31st)

() on an annual basis of 180 euros (due January 31st)

If possible, the child should be

() a girl / () a boy / () no preference

My / Our sponsorship starts on 1st (month / year).

(The sponsorship may start on any first day of the month, even retroactively.)

Place / Date:

Signature/s:

¹ We will also consider those children as war orphans who lost their father but whose mother is alive. In the current situation of war, mothers typically don't have an independent income. Therefore children who only lost their father are as much in need of help as children who lost both parents.

() I / We will set up a **standing order** to the following bank account:

Tübinger Syrienhilfe e.V.

Kreissparkasse Tübingen

BIC: SOLADES1TUB

IBAN: DE74641500200002338354

Or

() **SEPA Direct Debit (SDD) Scheme.** I / We authorize the association Tübinger Syrienhilfe e.V., Viktor-Renner-Str. 67, 72074 Tübingen (Germany), until cancellation, to charge my / our bank account with the respective contribution.

I / We also authorize my / our bank to charge my / our bank account according to the creditor's instructions (Tübinger Syrienhilfe e.V.).

Note: Within a period of eight weeks, starting with the charge date, I / we may demand a reimbursement of the amount charged. The conditions agreed upon with my bank are applicable.

SEPA Creditor Identification Number of Tübinger Syrienhilfe e.V.

DE67ZZZ00001401092

The unique mandate reference will be indicated by separate communication.

My / Our Bank Account Data:

Account Holder:

Bank (Name and BIC):

IBAN:

Place / Date:

Signature/s:

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