



NAIHATI PROLIFE

Donation Form

Please take a print out of this form and send it to:

Naihati Prolife
151 Mitrapara Road, Naihati
West Bengal
Zip: 743165; INDIA

Your Contact Details

Title: Mr./Mrs./Ms./Other _____ First Name _____ Surname _____

Address _____

Postal Code _____ Tel no: _____ Fax no: _____ E-mail: _____

I would like to become a regular donor and donate INR _____ or US\$ _____ or € _____ each month.

(In words) _____

I would like to make a one-time donation of INR _____ or US\$ _____ or € _____

(In words) _____

Your Preference

Please indicate which Project Field(s) you are most interested in donating to:

Education

Health

Child Rights / Protection

Awareness

Advocacy

Water Sanitation Hygiene

Signature of Donor

I have enclosed: Cheque/ Demand Draft (Please make cheque / demand draft payable to

“Naihati Prolife”

Please do not send cash through the post.

Original Money Receipt will be sent through post to your above mentioned address

we value your patronage and support