**SPONSOR PARENT/SPONSORSHIP Application Form**

Greetings,

With this form, I hereby state that I agree to join the Animal Sponsorship program and to regularly sponsor an animal/animal care with Animal Friends Jogja.

The data filled in the form below will be kept in confidence and will only be used for the AFJ Animal Sponsorship program.

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| **SPONSOR DETAILS** |
| Name in Full\* |  |
| Address\* |  |
| City\* |  |
| Post Code\* |  |
| Tel. No. / mob/cell phone\* |  |
| Email |  |
| Work Status |  |
| If you are representing another person or family member, for example a child, colleague, partner, or friend, as joint/group sponsors, business or organization, please provide details below: |
| **..................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................**  |
| ***\*) compulsory*** |

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| **PROGRAM PACKAGE OPTIONS** |
| **SPONSOR PARENT PROGRAM**  |
| Name of Animal  |  |
| Type of Animal(circle/tick your choice) | Cat (USD20.00) / Dog (USD30.00)  |
| **SPONSORSHIP PROGRAM**  |
| Cat | □ Looking Good (USD 5.00) – parasite treatment/grooming package□ Feeling Good (USD 15.00) – annual vaccination & vitamins package□ Enjoying Life (USD 30.00) – spay/neuter & medical bills package |
| Dog | □ Looking Good (USD 15.00) - parasite treatment/grooming package□ Feeling Good (USD 30.00) - annual vaccination & vitamins package□ Enjoying Life (USD 50.00) - spay/neuter & medical bills package |
| **DURATION OPTIONS FOR SPONSOR PARENT/SPONSORSHIP PROGRAMS****□ 6 (six) MONTHS****□ 12 (twelve) MONTHS** |
| ***Please tick (√) if you are filling in the form on paper or delete/cross out the option not chosen if you are filling in the form online*****Additional Information *(optional) – leave empty if not required***

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| **PAYMENT METHODS**  |
| **CASH PAYMENT** |
| Address for collection\* |  |
| Contact Person & number\* |  |
| Collection appointment\* |  Every ……………………………… day of the month (eg. 1st/3rd/28th ) |
| **BANK TRANSFER** |
| Bank Name\* |  |
| Account Holder Name\* |  |
| Account Number\* |  |
| If you’d like to transfer by direct debit, on what date will the transfer take place each month? |  |
| ***\*) compulsory***example / tutorial for regular transfers/direct debits : http://animalfriendsjogja.org/blog/transfer-berkala-bca/For sponsors who don’t choose to transfer by direct bank debit, please transfer your monthly gift between the 1st – 7th day of the month. The AFJ sponsorship team will be happy to send you a reminder by SMS/Email each month prior to your chosen transfer date. **Please transfer/deposit your monthly sponsor gift to Animal Friends Jogja (AFJ) using the following bank details::**Bank Name : Bank Negara Indonesia (BNI) Account Number : 024 8838 020Bank Address/Phone : Jl. Trikora no.1, Yogyakarta 55122, Telp. +62-274-562254Account Holder Name : Animal Friends Jogja (Sahabat Satwa Jogja)SWIFT Code : BNINIDJA |

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| **ADDITIONAL INFORMATION (For residents of Yogyakarta and surrounds only)**  |
| Sponsors living in or visiting Yogyakarta are welcome to come and visit their sponsor animal to get to spend time with them and get to know them. If you would like to visit, please make sure that prior to planning your visit that you contact AFJ so we can send you the visitors’ security form. The security regulations are set in place to ensure your experience is enjoyable and safe for both you and the animals at the AFJ sanctuary. Once you have completed the form and returned it to AFJ, you can request the day/time to visit and if you would like to make regular visits, fill out the form below.  |
| **Approximate schedule for visits** |
| **□** Every month on (day) : ……………………………………………….. / time : …………….□ Every week on (day) : ………………………………………………… / time : ………….…. |
| Who will accompany you ? |  |
| ***Please tick (√) if you are filling in the form on paper or delete/cross out the option not chosen if you are filling in the form online*** |

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| **SIGNATURE OF AGREEMENT** |
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**I hereby state that the information that I have filled in on this Sponsorship form is accurate and written under my own volition without duress from another party.**

 Signed, Received by,

 (.....................) (.....................)