

GIFT FORM

MBBS Class of 2018 Bursary

Please send

By mail: The Development Team

Dean's Office

Yong Loo Lin School of Medicine

1E Kent Ridge Road

NUHS Tower Block, Level 11

Singapore 119228

By fax: (65) 6778 5743

By email: giving_med@nus.edu.sg

MY GIFT

I would like to make:

*A monthly gift of \$ _____ for _____ months.

*An annual gift of \$ _____ for _____ years.

A one-time gift of \$ _____

To support:

MBBS Class of 2018 Bursary

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Please indicate if you are:

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I/We do not wish to be identified as the donor of this gift in NUS publicity materials.

*I/We hereby authorise the University to continue to deduct monthly/ annual payments from the credit card indicated above, including any replacement card thereof issued to me, until written termination is received from me.

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(I/We agree that my/our gift is subject to NUS' Statutes and Regulations, and to its Standard Terms and Conditions for Gifts [as may be amended from time to time by the University], updated for compliance with the Personal Data Protection Act 2012.)