

# SOUTH COAST HOSPICE ASSOCIATION

Registered No. 002-411 NPO VAT Reg. No. 4070114527 PBO 930002132  
Member of Hospice Association of KwaZulu-Natal (HAKZN)  
Member of Hospice Palliative Care Association of South Africa (HPCA)  
Accredited by the Council for Health Services Accreditation of Southern Africa (Cohsasa)  
Accredited by the Health & Welfare Sector for Education & Training Authority (HWSETA)

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Training: +27 (39) 682 5391

Email: grantwriter@schospice.co.za  
Website: www.schospice.co.za

## Donation Form

### Donor Information (please print or type)

Name	
Postal address	
City	
State/Province/District	
Postal Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

### Pledge Information

I (we) pledge a total financial amount of \_\_\_\_\_ to be paid in the form of:

\_\_\_\_\_ cash \_\_\_\_\_ cheque \_\_\_\_\_ direct deposit \_\_\_\_\_ electronic transfer

### Acknowledgement Information

Please use the following name(s) in all acknowledgements

Names:	Remain Anonymous _____
Signature(s)	
Date	

### Banking Details for South Coast Hospice Association. Please make cheques, or other donations payable to:

Account name	South Coast Hospice Association
Account Number	1398 023 256
Bank	Nedbank
Branch	Port Shepstone
Branch code	139 828

**THANK-YOU SO MUCH FOR YOUR SUPPORT**