

ref no :



Changing Students for life

Credit Card Contribution Form

Thank you for partnering with us to touch the young generation.
Kindly return the forms to us by mail or fax.

Personal details

Cardholder Name : _____

IC No (new) : _____

Tel No : _____ Email : _____

Address : _____

Contribution details

I hereby authorize FES to deduct from my credit card for the following until further notice from me :

RM : _____

one - time monthly quarterly half yearly yearly

Credit card details

visa master

Credit Card No :

Expiry date : (mm/yy) CVV (last 3 digits)

Please send receipt to my address email address

Signature : _____
(as per signature on card)

Date : _____

*2% processing fees will be added upon every transaction made. (e.g. For RM 100 donation, RM 2 will be added as processing fees; RM 102 will be listed on your credit card statement.)

For office use

Confirmed that the above information has been verified.

Administrative Officer : _____

Date : _____



fellowship of evangelical students

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