

**WOODBRIIDGE HOSPITAL CHARITY FUND**

10 Buangkok View Singapore 539747 UEN: 201940371M

[imh.fundraising@nhghealth.com.sg](mailto:imh.fundraising@nhghealth.com.sg)

**APPLICATION FORM FOR INTERBANK GIRO**

Yes, I/we would like to make a donation to the Woodbridge Hospital Charity Fund.

Please tick:  New Application  Change of Bank Account

**PART 1: FOR APPLICANT'S COMPLETION**

Date:

To: Name of Bank:

Name:

Branch:

NRIC / Company Registration Number:

Amount of Donation:

Address:

\$

Expiry date for this authorization:

E-mail / Phone:

- (a) I/We hereby instruct you to process Woodbridge Hospital Charity Fund's instructions to debit my/our account.
- (b) You are entitled to reject Woodbridge Hospital Charity Fund's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- (c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through Woodbridge Hospital Charity Fund.
- (d) It is the Woodbridge Hospital Charity Fund's responsibility to inform banks upon the expiry of this authorisation and to ensure no deductions are made thereafter.

My/Our Name(s) as in Bank's Record:

My/Our Account Number:

My/Our Bank Address:

My/Our Company Stamp / Signature(s) / Thumbprint(s)\*:

(As in bank's records)

**PART 2: FOR WOODBRIDGE HOSPITAL CHARITY FUND ("WHCF")'S COMPLETION**

Bank	Branch	WHCF's Account Number
7 1 7 1	0 7 2	0 7 2 0 2 0 8 7 9 0

Donor's Reference Number

Bank	Branch	Account Number To Be Debited

**PART 3: FOR BANK'S COMPLETION**

To: Woodbridge Hospital Charity Fund

We hereby certify that the signature(s) / other particulars as stated in Part 1 agree with that contained in our files

This Application is hereby REJECTED (please tick) for the following reason(s):

- Signature/Thumbprint# differs from Bank's records
- Signature/Thumbprint# incomplete/unclear#
- Account operated by signature/thumbprint#
- Wrong account number
- Amendments not countersigned by customer/BO
- Other reason(s): \_\_\_\_\_

\_\_\_\_\_  
Name of Approving Officer

\_\_\_\_\_  
Authorised Signature

\_\_\_\_\_  
Date

Please complete this GIRO application form by providing your full name, NRIC / Company Registration Number, and account details. Submit the completed form to:

LHBM Philanthropy Department, Institute of Mental Health  
Buangkok Green Medical Park, 10 Buangkok View  
Singapore 539747

For accounts operated via thumbprint authentication, please visit your designated bank branch with your NRIC or passport to have your thumbprint captured and officially witnessed by bank personnel.

GIRO is a convenient, cashless mode of payment. To help you better understand the GIRO payment method. Here are some answers to the most frequently raised questions on GIRO:

**How long do I need to wait before my GIRO arrangement is effective?**

GIRO arrangements require up to 21 working days to take effect. Please check with your bank if your GIRO arrangement is successful.

**Can I arrange for another party to affect the GIRO arrangement through his/her bank account or pay for another party?**

Yes, a third-party can affect the GIRO arrangement through his/her bank account or pay for another party. Please specify the account holder's full name, NRIC number, and bank account details in the INTERBANK GIRO form. The account holder must also provide their signature or thumbprint in the INTERBANK GIRO form.

**When will the GIRO deduction be made?**

Monthly deductions will be processed on the 5th of each month, or the next working day if the 5th falls on a weekend or public holiday. All transactions will be reflected in your monthly bank statement.

**What happens if there are insufficient funds in my bank account?**

In the event of insufficient funds, we will contact and inform you that the GIRO deduction is unsuccessful. Alternative payment methods will also be requested. Please maintain sufficient funds in your bank account for the subsequent due date. GIRO arrangements will be terminated following three consecutive failed deduction attempts. Please note that banks may charge a service fee for unsuccessful deductions due to insufficient funds.

**Can I stop my GIRO payment?**

GIRO arrangements may be terminated by emailing us at [imh.fundraising@nhghealth.com.sg](mailto:imh.fundraising@nhghealth.com.sg). Please provide a minimum of five working days' notice prior to the next scheduled deduction date. If applicable, please notify your bank directly to terminate this GIRO arrangement.

**What happens to my GIRO arrangements that are no longer used?**

Please review your GIRO arrangements periodically and terminate those that are no longer required with your bank. Please approach your bank and complete the necessary termination forms.

**How will my personal data be used?**

Personal data collection and processing are in compliance with the Personal Data Protection Act 2012 (PDPA). Information is disclosed to authorised WHCF personnel for the purposes of processing GIRO donations, issuing tax exempt receipts, mailing of thank you cards/letters, and other related donor management activities. Data access will be disclosed only to authorised staff involved in these processes.

**Can I withdraw consent for my personal data to be used?**

Yes, you may withdraw consent for the usage of your personal data by emailing [imh.fundraising@nhghealth.com.sg](mailto:imh.fundraising@nhghealth.com.sg). For any feedback, concerns, queries or complaints about WHCF's personal data protection policies and practices, please contact the IMH Data Protection Officer at tel: 6389 1918 or write in to:

The Data Protection Officer  
Institute of Mental Health  
10 Buangkok View  
Buangkok Green Medical Park  
Singapore 539747