



**Little Angels**  
 Nestled under God's wing  
 Home for Children with Special Needs  
 PBO Ref. No: 930026059 NPO Reg. No: 043-541

**Registration Form**

REG: 2004/02410/08 NPO 055250 Trust: IT1037/2007

**Client Details:**

Date :	
Name:	
Surname:	
Company: name:	
: contact person	

**Contact Details**

Telephone Number:	
Cell Number:	
Email Address:	

**Address for delivery**

Special Instructions	
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<b>Order details:</b>	<u>Nr of boxes</u>	<u>Amount</u>
Little Angles Selection (3 white & 3 red) R275 p/box of 6 bottles		
Little Angels Red (6 red) R325 p/box of 6 bottles		
Total		

**Payment details**

Please send proof of payment and this form, either by email to [ltlangel@mweb.co.za](mailto:ltlangel@mweb.co.za) or by fax to (086) 684 1489

Our Bank details: **Charity Wines Trust**  
**Nedbank branch code: 101009 (Gardens)**  
**Type: Cheque account**  
**Acc nr: 1010105590**  
**Reference: your name**

**Membership details - only need to be completed for debit orders -**

Starting Date:	
Debit Order Amount:	
Your banking Details (for mthly d/orders)	
Name Of Bank:	
Branch code & name	
Account Name:	
Account Type:	
Account Number:	
Day for debit order (15 <sup>th</sup> /30 <sup>th</sup> )	

Acceptance:  
 I, ....., hereby give permission to heart to withdraw the above said amounts from my account on the agreed day of each month for the agreed period.

**Contact us: (021) 851 0908**

**Fax: (086) 684 1489**

<b>Notice:</b> Membership is continual and can be cancelled with one months prior notice by member	Signature:
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**Thank you for making a difference**