



**REN CI HOSPITAL & MEDICARE CENTRE
FLAG DAY ON 20 MARCH 2010 (SATURDAY)**

Particulars of Individual / Organisation / School

Name: _____

Address: _____

Contact Person: _____

Contact No: _____ (HP) _____ (H/O)

Email Address: _____

We are pleased to support Ren Ci Flag Day 2010 in the following way(s):

- Provide volunteers (Form B) for street collection on 20 March 2010.
Please provide us _____ donation tins (no. of tins) with flag stickers.
- Pledge Cards
Please send us _____ Pledge Cards (no. of cards).
**Note: Pledge Cards collection can be conducted from 20 February to 19 March 2010.
Please submit form before 18 Feb 2010*
- Make a donation
Our cheque no. is _____ for the amount of
\$ _____ made payable to 'Ren Ci Hospital & Medicare Centre'. Kindly please
indicate "Ren Ci Flag Day 2010" at the back of the cheque.
- Organise a fundraising event.
Please contact Ren Ci Hospital & Medicare Centre for further discussion.

To respond, please mail/fax/email to:

Ren Ci Hospital & Medicare Centre
Fundraising & Volunteer Development Dept
71 Irrawaddy Road
Singapore 329562
Tel: 6355 6481 Fax: 6355 6405
Email: lohzw@renci.org.sg

Thank you for your support!



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VOLUNTEER FLAG DAY REGISTRATION FORM

1) Please select your preferred shift

- Shift 1 – 0900 to 1400 (5 hours)
 Shift 2 – 1300 to 1800 (5 hours)

2) Please select your preferred Reporting Centre

1st Choice (pls tick one)

- Bishan MRT
 Outram Park MRT
 Boon Lay MRT
 Sengkang MRT
 Tampines MRT
 Woodlands MRT

2nd Choice (pls tick one)

- Bishan MRT
 Outram Park MRT
 Boon Lay MRT
 Sengkang MRT
 Tampines MRT
 Woodlands MRT

** Note: Collectors must be 15 years and above*

No.	Name (according to NRIC)	NRIC No.	Contact No.	Remarks
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

(Please make copies if necessary)

Kindly please fax or mail us the registration form before 5 March 2010
Thank you for your support!