



Walindwa Sponsorship Application Form

PO Box 270024, San Diego, CA, 92198-2024
www.walindwa.org

Partners with Elma Barnett Children's Centre Kamonong

Donor Information (please print or type)	Date:
Name(s)/Group	
Mailing address	
City	
State	
ZIP Code	
Telephone (Primary)	
Telephone (Secondary)	
E-Mail	

Pledge Information

I (we) would like to sponsor a child at this annual need:

Primary Level: \$500
 Primary Level: \$1,000
 Secondary Level: \$1,000
 Higher Education Level: \$1,250 to \$3,000 (Cost depends on type of education)

Student selection

I (we) would like to sponsor this child: Name: _____

Please choose our child. Preference: Male Female

I (we) pledge a total of \$ _____ per year, which will be paid in the form of:
 check PayPal stock donation

I (we) would like to pay the pledge:

In a lump sum paid: now future date: _____
 In installments paid: monthly quarterly

Schedule first payment for: Jan 1 Apr 1 Jul 1 Oct 1
 Please send a donation reminder: email postal mail

PLEASE MAIL TO: WALINDWA, PO Box 270024, SAN DIEGO, CA 92198-2024

Thank you for your sponsorship!

*Although our hope is that you will develop a long term relationship with your sponsored child,
 the option to begin, renew, or end sponsorship is available at any time.*