

Supporter Card Application

Apply online www.myschool.co.za OR e-mail cs@myschool.co.za OR call 0860 100 445 OR complete this form and fax to 0866 822 833.

| Beneficiary Details: This request is for a: New Card Replacement Card Change Beneficiary | | | | | | | | | | | | | | | | | |
|---|---|----------------|---------------------------------------|-----------|---------|----------|-----------|-----------|----------------|-----------------------|----------------------|-----------|-------|----------|----|---------|-----|
| | This request is for | a: New Car | d | Replac | cement | Card | | Cha | inge Ber | neficiary | | | | CV | Y | ~0 | a'z |
| м | ySchool MyVillage MyPanet | If you are a c | urrent My | School su | upporte | er, plea | ase pro | ovide yo | ur card r | number. | | | | 1 | | | |
| | Your card no: | | | | | | | | | | | | | | | | |
| Beneficiary name | | | City / Region | | | | | | | | | | | | | | |
| CityKidz Pre & Primary School [11736] | | | 18 Mooi Street, City & Suburban, 2023 | | | | | | | | Pre & Primary School | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Your details: | | | Gender: Male Female Da | | | | | | | te of birth: YYYYMMDD | | | | | | | |
| | First Name: | : | | | | | | | | | | | | | | | |
| | Surname | | | | | | \square | | $\neg \square$ | | | | | | | | |
| | ID or Passport Number:* | · | | | | | | | | | | | | | | | |
| | | *Your ID or | Passport | number is | s comp | ulsory | in or | der for u | is to prod | | r applica | tion | | | | | |
| | Postal Address: (For card delivery) | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | Posta | al Code: | | | |
| | E-mail Address | : | | | | | | | | | | | | | | | |
| Telephone (H): | | | Cellphor | | | | | | | e: | | | | | | | |
| | Telephone (W) | : | | | | | | | | | Lar | nguage: | E | nglish | ļ | Afrikaa | ans |
| | | | | | | | | | | | | | | | | | |
| Chi | Idren's Details (if applicabl Child's name | e): | Su | rname | | | | | | | Date | of Birth | (| Y/MM/DI | וו | | |
| 1 | | | Ju | mame | | | | | | | Date | or birtin | (| | , | | |
| 1. | | | | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | | | |
| Keep me informed: | | | | | | | | | | | | | | | | | |
| 1. MySchool MyVillage MyPlanet will send you a monthly e-mail statement reflecting your transactions and funds raised. | | | | | | | | | | | | | | | | | |
| 2. Permission for MySchool MyVillage MyPlanet to talk to you: | | | | | | | | | | | | | | | | | |
| MySchool would like to keep you updated about new partners, competitions, exclusive promotions, announcements and other marketing information. You may opt out of this communication at any time. | | | | | | | | | | | | | | | | | |
| I DO NOT WANT Email | | | | | | | | | | | | | | | | | |
| I DO NOT WANT Post | | | | | | | | | | | | | | | | | |
| 3. Permission for Woolworths to talk to you | | | | | | | | | | | | | | | | | |
| Woolworths offers a tiered loyalty programme and preferential pricing exclusively for Woolworths and MySchool cardholders. The tiered benefits are sent via email and/or post. You may opt out of this communication at any time. | | | | | | | | | | | | | | | | | |
| I DO NOT WANT Email** I DO NOT WANT SMS **Please note you will not receive loyalty benefits if selected | | | | | | | | | | | | | | | | | |
| | NOT WANT Post** | | | | . 100 | | | | | . Syany D | | 20.00100 | | | | | |
| | ermission to share your details | | . — | | | | | | | | | | | | | | |
| I DO NOT WANT to share my details with a third party | | | | | | | | | | | | | | | | | |

Your Signature_

Date