MPI Gift Pledge form

Please complete and scan the form to info@moetipracticum.ac.bw/ info@futureprofessionals.co.bw or post to Moeti Practicum Institute P O Box 70534 Gaborone or fax to 00267 390 8284. Please put your reference as GMPI#-Name and Surname

Title	Postal address
Surname	Telephone
Name	Cellphone
Nationality	Email Address
I pledge a gift of:	
Amount: BWP 100 BWP 200 BWP 300 BWP500 BWP1000 Other BWP Frequency: Monthly quarterly half-yearly annually Period: 1 year 2 years 3 years 4 years 5 years indefinitely until I alter in writing Date of first deposit Bank Debit Order	
Bank	Branch
Account Name	Account no
Branch code	Sort Code
Bank Address	
I pledge to give my time of: ☐1 HR ☐ 2HRS ☐ 3HRS ☐ 4HRS ☐ 5HRS ☐1 day ☐1 week ☐ other Frequency: ☐ weekly ☐ Monthly ☐quarterly ☐ half-yearly ☐ annually	
Single Contribution	
The amount of my contribution is	
Donation Earmarked for	
□conducting events and fundraising activities	☐ Fixed property
☐ Developing infrastructure	☐ Teaching equipment
☐Learning material	☐ Institutional projects
□Scholarships	□Sports
□Bequest	□other
 □ I (we) wish to have our gift remain anonymous. □ My/our gift may be acknowledged to inspire others. □ I (we) intend to leave a bequest to MPI when I update my will □ I (we) have already included MPI in my Will. and wish to be included in the Legacy of the institution 	
Signature(s)	Date
Bank Details: Moeti Practicum Institute (Pty) Ltd. <u>Barclays Bank: Account No: 145 09 54: Branch: Mall Branch; Branch code: 001; Swift</u> Code: BARC-BWGX; Bank code: 290167	

I / we acknowledge that the party hereby authorised to effect the drawing(s) against my / our account may not cede or assign any of its rights to any party without my / our prior consent and that I / we may not delegate any of our obligations in terms of this contract / authority to any party without prior written consent of the authorised party