



**Child Foundation Sweden**  
 Passion to learn, Joy of life

## Sponsorship Application Form

### Sponsor Information

Name: .....

Address: .....

City: .....

Postal Code: .....

Phone: .....

Email: .....

I prefer future correspondence to be in:

Farsi

English

Swedish

### Sponsorship details

I already know my child, name of child/ file no. : .....

I would like to help a:

Girl

Boy

Either

Child

Teenage

From a specific city .....

I just want to make a general monthly donation

### Donation details

I choose a monthly sponsorship gift of:

300 SEK

400 SEK

500 SEK

Other amount ..... SEK

I would like to pay every

month

three months

six months

Other period .....

### Payment method:

I would like Child F to setup the monthly payments (Autogiro content form will be sent for you)

I choose to setup a monthly payment myself (Bankgiro information will be sent for you)

### Signature and authorization

Place/Date .....

Signature .....

Name .....

By signing this form I allow Child Foundation to deduct a maximum of 5% of my payments to cover its expenses and also payments to other children other than the child mentioned in this form.

Child Foundation- Sweden  
 www.childf.net, info@childf.net  
 Tel: +46 76 705 6735

Address: Kruthornsvägen 13, 19253 Sollentuna  
 Stockholm, Sweden, C/O Naghmeh Okhovat  
 Organization number: 802497-0918