

Child Sponsorship form

I hereby declare my willingness to take on a sponsorship and to sustainably support the life of a child and his family through my regular contribution.

Contact details of the sponsor

- Salutation: Mr. / Mrs.
- First and last name:*
- Street, House Number:*
- Postal code, city:*
- Email address:*
- Phone number:*

Information on sponsorship

***Information about the child:**

☐ Girls ☐ Boy ☐ No preference

Monthly fee: 50 €*

***Payment method:**

☐ Standing order

City, date: _____ Signature: _____

Privacy notice* I agree that HCI stores my personal data (name, address, e-mail address and telephone number) electronically in order to enable the sponsorship and to inform me about its progress. My data will not be passed on to third parties. I can revoke my consent at any time.

