CONFIDENTIAL

THE JALLOW FOUNDATION, THE GAMBIA

Registration No. XT28094

CHILD SPONSORSHIP APPLICATION FORM

We are so pleased that you have decided to sponsor a child and would ask that you complete this form in order that we may process your application

THANK YOU

TITLE: .....

FIRST NAME: .....

SURNAME: .....

ADDRESS: .....

.....

COUNTY/STATE: .....

COUNTRY: .....

POST/ZIP CODE: .....

TELEPHONE/MOBILE NUMBER: .....

(Including Area/Country Code)

EMAIL ADDRESS: .....

ARE YOU OVER THE AGE OF 18? Please tick the box to confirm. ☐

HAVE YOU SEEN THE CHILD YOU WISH TO SPONSOR?

IF SO THEN PLEASE STATE THE CHILDS FULL NAME AND REFERENCE NUMBER BELOW

CHILDS FULL NAME: .....

CHILDS REFERENCE NUMBER: .....

IF YOU WISH US TO PICK A CHILD FOR YOU TO SPONSOR DO YOU HAVE A PREFERENCE, GIRL OR BOY? ☐

PLEASE TICK BOX IF YOUR PREFERENCE IS A GIRL ☐

PLEASE TICK BOX IF YOUR PREFERENCE IS A BOY ☐

Please Return Completed Form To:

PO Box 669, FAREHAM. Hampshire, PO14 9LX

SIGNATURE:

DATE:

PLEASE NOTE THAT COMPLETING, SIGNING, DATING AND RETURNING THIS FORM CONFIRMS YOUR WISH TO SPONSOR A CHILD

Trustees: Kebba Jallow, Naomi Jallow, Ebrima Jallow