



# MySchool MyVillage MyPlanet Supporter Card Application



MySchool MyVillage MyPlanet

To apply online go to [www.myschool.co.za](http://www.myschool.co.za) or e-mail us at [cs@myschool.co.za](mailto:cs@myschool.co.za), call 0860 100 445 or simply complete this form and fax to 0866 822 833.

## Beneficiary Details (you may support up to 3 Schools/Charities):

This request is for a: New Card  Replacement Card

If you are a current MySchool supporter, please provide your card number.

Your card no:

	Beneficiary name	Address/Branch/City	Phone Number (not compulsory)
1.	Dainfern College (10358)		
2.			
3.			

## Your details:

Title:     Gender: Male  Female  Language: English  Afrikaans

First Name:

Surname:

ID Number:\*

\*Your ID number is compulsory in order for us to process your application

Postal Address:

(For card delivery)

Postal Code:

E-mail Address:

Telephone (H):           Cellphone:

Telephone (W):

## Children's Details (if applicable):

	Child's name	Surname	Date of Birth (YYYY/MM/DD)
1.			
2.			
3.			

## Keep me informed:

1. MySchool will send you a monthly e-mail statement reflecting your transactions and funds raised.

### 2. Permission for MySchool 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 MySchool to contact me via the following channels (select if applicable):

Email  SMS  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 Woolworths to contact me via the following channels (select where applicable):

Email\*\*  SMS  Post\*\*  Telephone  \*\*Please note you will not receive loyalty benefits if selected

I DO NOT want to share my details with a third party (select if applicable)

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

**Every Swipe Counts! Fax to 0866 822 833 or Call 0860 100 445**