



Application form: Kindness Corner

Name of organisation	
Fund Raising no: (must be indicated)	
Please provide a brief description of your organisation:	
Name & Surname of contact person	
Postal address	
Postal code	
Telephone (w)	
E-mail address (compulsory)	

Please describe the items you plan to sell and/or other activity you are planning:

Form completed by: _____ (name & surname)

Capacity: _____

Date: _____

Signature: _____

Please email the completed application form to bronwynr@redefine.co.za