

## **Donation to Sakya Centre**

Date: \_\_\_\_\_

### **Purpose of donation**

- Charitable Donation
- Education—Academy
- Education—Sakya Centre Education Department
- Medical—Charitable Hospital

Currency: \_\_\_\_\_ Amount: \_\_\_\_\_

### **Donor Details**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email ID: \_\_\_\_\_

PAN Number (if any): \_\_\_\_\_

Nationality: \_\_\_\_\_ Passport Number: \_\_\_\_\_

Thank you. Please mail your fully completed form with the bankdraft/cheque/money order to Sakya Centre at 187 Rajpur Road, P.O. Rajpur 248009, Dehradun, Uttarakhand, India.