



## SPONSORSHIP ENROLLMENT

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

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

\*Email is required for sponsorship. All program communication will be via email.

### Support by Monthly Electronic Funds Transfer (EFT) – FABRETTO'S PREFERRED METHOD

- I want to sponsor a child with a monthly EFT contribution of \$30.00.
- I want to sponsor a scholarship student with a monthly EFT contribution of \$65.00.

I authorize the deduction indicated above from my checking account by EFT. I acknowledge that I have read and understand the terms and conditions of Fabretto's EFT program.

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

Return this form along with a check payable to The Fabretto Children's Foundation for your first month's contribution. Payments thereafter will be deducted automatically from your checking account.

### Support by VISA or MasterCard

- I want to sponsor a child with a credit card contribution of:
  - \$30 Monthly
  - \$90 Quarterly
  - \$360 Annually
- I want to sponsor a scholarship student with a credit card contribution of:
  - \$65 Monthly
  - \$195 Quarterly
  - \$780 Annually

VISA  Mastercard Card #: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

- Billing address is same as above
- Billing address is different: \_\_\_\_\_

I authorize the billing indicated above to my credit card account. I acknowledge that I have read and understand the terms and conditions of Fabretto's credit card program.

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

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For more information please contact Joanne Mazzella at [mazzellaj@fabretto.org](mailto:mazzellaj@fabretto.org).

Please return your Enrollment Form and check (when applicable) payable to:

The Fabretto Children's Foundation, 3124 North 10<sup>th</sup> Street, 2<sup>nd</sup> Floor, Arlington, VA 22201

## Sponsorship Preferences (optional)

We will do our best to meet your preferences if stated. However, if a Child Profile matching your criteria is not ready at the time of your enrollment, we will contact you regarding the children available for sponsorship and will attempt to match your criteria as closely as possible.

Child Profile:  Male  Female Age: \_\_\_\_\_

Area of Study (for scholarship students): \_\_\_\_\_

## Language Choice for Correspondence

If you read Spanish, you may not need to have correspondence from your sponsored child translated into English. Please mark your language preference below:

English  Spanish

## Sponsor Commitment

We ask that Sponsors commit to sponsorship until the completion of high school (for Child Sponsorships) or the completion of job training (for Scholarship Sponsorships).

## Administrative Fees

The first month's contribution will be used to cover the cost of setting up your Sponsorship. Thereafter, 100% of your Sponsorship dues will be sent directly to Nicaragua for programs support.

## Termination

Sponsors may terminate their Sponsorship at any time. Please notify Fabretto in writing (by mail, fax or e-mail) if you wish to cancel your participation in the Sponsorship Program.

## Receipts/Acknowledgements

An annual receipt will be issued to donors at the address provided above for tax and record keeping purposes.

For more information please contact Joanne Mazzella at [mazzellaj@fabretto.org](mailto:mazzellaj@fabretto.org).

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## EFT TERMS & CONDITIONS

The Fabretto Children's Foundation (FCF) will use the Sponsorship Enrollment Form for authorization of Electronic Funds Transfer (EFT) to electronically debit your personal account at the designated financial institution indicated by your initial contribution.

- **Financial Institution:** If you would like the monthly donation to be debited from an account other than the account from which your initial contribution is being made, please include the bank name, type of account (checking or savings), name as it appears on the account, the routing transit number, and the account number.
- **EFT Timing:** Your account will be debited on the 10<sup>th</sup> of each month (or the following Monday if the 10<sup>th</sup> falls on a weekend) through CheckFree Systems. Your first EFT will generally occur in three to six weeks from submission of authorization.
- **Returned Item Fee:** There is a \$20 fee for returned items/declined transfers. Please notify Fabretto as soon as possible if you are changing or closing your bank account.
- **Privacy Policy:** Fabretto shall not disclose to third parties (other than to assist in completing the transaction or as required by law) your account information or other personal information without your prior consent.
- **Termination:** Fabretto will continue monthly EFTs indefinitely unless notified otherwise by Sponsor. Sponsors may terminate at any time. Please notify Fabretto in writing (by mail, fax or e-mail) if you must change accounts or terminate your contributions.

For more information please contact Joanne Mazzella at [mazzellaj@fabretto.org](mailto:mazzellaj@fabretto.org).

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## CREDIT CARD TERMS & CONDITIONS

The Fabretto Children's Foundation (FCF) will use the Sponsorship Enrollment Form for authorization to automatically charge your credit card as indicated on the Sponsorship Enrollment Form.

- **Charge Timing:** Your account will be charged on the 10<sup>th</sup> day of any billing month through CheckFree Systems or Donate.net. Your first charge will generally occur in three to six weeks from submission of authorization.
- **Returned Item Fee:** There is a \$20 fee for returned items/declined transactions. Please notify Fabretto as soon as possible if you are changing or closing your credit card account.
- **Privacy Policy:** Fabretto shall not disclose to third parties (other than to assist in completing the transaction or as required by law) your account information or other personal information without your prior consent.
- **Termination:** Fabretto will continue the authorized credit card charges indefinitely unless notified otherwise by Sponsor. Sponsors may terminate at any time. Please notify Fabretto in writing (by mail, fax or e-mail) if you must change accounts or terminate your contributions.

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