



ST. GABRIEL'S SECONDARY SCHOOL

24 Serangoon Ave 1
Singapore 556140

Tel: +65 62889470

Fax: +65 62898615

www.stgabrielssec.moe.edu.sg

Email: stgss@moe.edu.sg

St Gabriel's Foundation Charity Movie 2021

Dear Parent / Guardian

Date: 1 March 2021 to 28 Feb 2022

Venue: Any Cathay Cinema

Objective

In support of St Gabriel's Foundation and Boys' Town Sanctuary Care

Sanctuary Care is a community respite care service by Boys' Town to safeguard the welfare of vulnerable children. We provide temporary care and shelter to infants and young children who require out-of-home care within a family-based environment. These children come from families who are experiencing difficulties and are unable to care for them for a short period of time.

How to donate

- For every \$50 donation, a movie voucher will be given as a token of our appreciation.
- An outright donation of any amount. **Cheque** to be **issued to "St. Gabriel's Foundation"**.
- The Response Form (attached) must be submitted with the donation made.
- A 250% tax deduction will be processed for donations of \$500 and above.

How to redeem movie ticket (for full terms and conditions, please refer to voucher):

- 1 voucher entitles you to 1 screening at any Cathay Cineplex in Singapore only
- Voucher is valid until expiry date stated on the voucher
- Can be redeemed from manned counters and self-service kiosks in the cinema
- Can be used from Monday to Sunday, including Eve of Public Holiday and Public Holiday
- Not valid for 3D, Tamil, Hindi, Special-Priced, Movie Marathons, Film Festivals, Special Previews & The Platinum Movie Suites tickets

Enquiry and donation

Contact persons : Ms Ho Lee Joon at 62889470 ext 107

Ms Gloria Lee at 62889470 ext 102

Email: STGSS@MOE.EDU.SG

Website: <http://www.stgabrielssec.moe.edu.sg>



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[Response Form] St Gabriel's Foundation Charity Movie 2021

Name of Student : _____

**Please DO NOT use
correction fluid**

Class of Student : _____

Birth Certificate/NRIC No : _____

For every \$50 donation, **ONE** Cathay movie voucher will be given as a token of our appreciation. You are also welcome to make an outright donation of any amount.

Please note that 250% tax deduction will be processed for donations of \$500 and above.

I would like to donate \$_____.

I would like to receive _____ vouchers (state number of vouchers).

MODE OF PAYMENT

CASH (Please submit the payment to the School's General Office)

CHEQUE (All Cheques Issued Payable to "**ST GABRIEL'S FOUNDATION**" and submit to the School's General Office)

Only donations of **\$500 and above** are eligible for 250% tax deduction. Please kindly provide the details if you are donating \$500 and above:

Full Name of Donor: _____

NRIC No: _____

Contact Number: _____ Email Address : _____

Name of Father/Mother/Legal Guardian*

Signature and Date

*Delete whichever is not applicable



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For office use

Vouchers Collection Date: _____ **Signature:** _____

(a) Payment received: \$ _____

(b) Number of tickets issued: _____

Ticket serial no issued: _____

Donation received (from tickets not issued): \$ _____ **[(a) - (b) x \$50]**

Tax Deduction : YES / NO
