



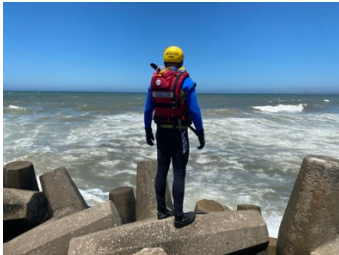
COASTAL WATER RESCUE

Non-Profit Organisation No. 082-977-NPO

P.O. Box 40304, Walmer, 6065

Email: ops@cwrescue.co.za

<http://www.cwrescue.co.za> / Tel: 081-072-2103



Coastal Water Rescue (CWR) is a Port Elizabeth (PE) based, registered NPO (No. 082-977) staffed entirely by volunteers and funded solely by donations.

Our Mission: CWR responds to all water-related emergencies within the greater Nelson Mandela Bay area. Our primary focus is deploying rescue swimmers to save lives. Activations range from responding to drownings at local beaches to assisting flood victims during water events. For instance, during the recent Kariega floods, the squad responded at 11 pm and only stood down at 7 am the following morning.

Collaboration: We do not operate in isolation, but we work hand-in-hand with other emergency services.

In situations where in-water rescue is not required, we offer operational support to them on-scene.

Your Contribution Makes a Difference: Equipping our members with the right safety gear is crucial.

The cost to equip a single swimmer exceeds R5,000. Additionally, we have other expenses like insurances, SMS communications to members etc.

How You Can Help: Any donation, big or small, is appreciated. However, ongoing donations help us immensely.

We now offer monthly debit order donations through Netcash.

If you're interested in supporting us through this method, please contact our treasurer at treasurer@cwrescue.co.za. There is no set amount, you decide.

Donations by Bank Transfer:

- Account Holder: Coastal Water
- Bank: Investec Private Bank
- Account Number: 50009 571 898
- Branch Code: 580105
- Account Type: Savings Account

Visit our website for more information: <https://www.cwrescue.co.za>



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Authority/Mandate: Paper/Electronic

Account Holder		Date	
eMail		Contact	
Address		Amount	

Dear Sirs/Madams, the details of my/our account are as follows:

Bank		Branch Town	
Branch No		Account Name	
Account No		Type of Account	

Abbreviated Shortname to be used:

CWRESCUE

Refer to contract reference number

("the Contract Reference Number")

I/We hereby authorise Netcash (Pty) Ltd to issue and deliver payment instructions to your banker for collection against my/our abovementioned account at my/our abovementioned bank on condition that the sum of such payment instructions will not differ from my/our obligations as agreed to in the Contract Reference Number.

The individual payment instructions so authorised must be issued and delivered on the date when the obligation in terms of the Agreement is due and the amount of each individual payment instruction may not differ as agreed to in terms of the Agreement.

The payment instructions so authorised to be issued must carry the Contract Reference Number, included in the said payment instructions, and must be provided to identify the specific contract. The said Contract Reference Number should be added to this form in section E before the issuing of any payment instruction and communicated directly after having been completed.

I /we agree that the first payment instruction will be issued and delivered on _____ (date) and thereafter regularly on the _____ of each month.

If however, the date of the payment instruction falls on a non-processing day (weekend or public holiday) I agree that the payment instruction may be debited against my account on the following business day; or

Subsequent payment instructions will continue to be delivered in terms of this authority until the obligations in terms of the Agreement have been paid or until this authority is cancelled by me/us by giving you notice in writing of not less than the interval (as indicated in the previous clause) and sent by prepaid registered post or delivered to your address indicated above.

B. MANDATE

I/we acknowledge that all payment instructions issued by you will be treated by my/our abovementioned bank as if the instructions had been issued by me/ us personally.

C. CANCELLATION

I/we agree that although this authority and mandate may be cancelled by me/us, such cancellation will not cancel the Agreement. I/we also understand that I/we cannot reclaim amounts, which have been withdrawn from my/our account (paid) in terms of this authority and mandate if such amounts were legally owing to you.

D. ASSIGNMENT:

I/We acknowledge that this authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party.

Signed on this day of Signed:

SIGNATURE AS USED FOR OPERATING ON THE ACCOUNT

.....
ASSISTED BY

.....
CAPACITY

FOR OFFICE USE

THE AGREEMENT REFERENCE NUMBER IS

Ops-Manager: Dirk F Erasmus / Treasurer: Coenie van den Heever