

Your gift, their hope.

At NHG Health, we are dedicated to keeping 1.5 million residents healthy and well. Yet, many low-income patients struggle to afford treatment. Your donation to the NHG Fund directly supports them.



Vital Patient Care

Thanks to donor support, Mdm Kan could receive care and transport to access the treatment she urgently needed for her skin condition. Now she is living life fully again.

Your gift can help patients like her find their path to healing.



Life-Changing Rehabilitation

When an accident left Asyraf paralysed, our groundbreaking rehabilitation programme helped him walk again.

Your contributions can give patients like him a second chance at life.



Mental Health Support

When mental health challenges caused a family to lose their home, our team stepped in to help caregivers cope while enabling the whole family to recover.

Your generosity does not just help one person - it uplifts entire families.

Your gift goes far

\$10,000



Covers one year of medical costs for 10 low-income patients

\$30,000



Funds 150 rehabilitation therapy sessions to help patients recover their independence

\$50,000



Equips 690 youths with mental resilience skills

Please email the completed form to
nhggroup.advancement@nhghealth.com.sg

Thank you for your gift of hope.

Gift Commitment

I would like to support the NHG Fund with a donation of SGD _____.

All monetary donations will enjoy a tax deduction of 250% (applicable to Singapore taxpayers).

Please email me a tax deduction receipt (applicable for donations above \$50).

My preference is to support

Patient Care Rehabilitation Medicine
 Mental Health General Others: _____

While we strive to allocate your gift according to your preference, it may be directed to the area of greatest need— including advancing patient care, supporting life-changing research, and sustaining other vital programmes across NHG Health.

Contact Information

Name: (Dr / Mr / Mrs / Ms) _____

NRIC/FIN: _____

Email: _____ Contact Number: _____

Mailing Address: _____

Signature / Date: _____

Payment Method

By Bank Transfer

Account name: National Healthcare Group fund

Bank name: DBS Bank

Account Number: 003-943-221-6

By PayNow

1. Please scan the QR code with the PayNow app or enter UEN 201623926M216
2. Under reference, please enter your NRIC/FIN no. and name



Personal Data Consent

I consent to the collection, use and/or disclosure of my personal data by NHG Fund for the purposes of processing my donations, including disclosure of my personal data to tax authorities and for the purpose of issuing tax-deductible receipts and other donor-related management activities, and such other reasonably related purposes set out in the NHG Personal Data Protection Policy available at <https://www.nhghealth.com.sg/personal-data-protection-notification>