



## 捐款表格 Donation form

請用正楷填寫並於適當方格內加上「✓」號。Please fill in with block letters and tick as appropriate

捐款人資料 Donor's information			
捐款人姓名 Name of donor	(先生/小姐/女士) (中文姓名 Name in Chinese)	(Mr/Miss/Ms) (英文姓名 Name in English)	身份證號碼 (首 4 位數字) HK identity card no. (first 4 digits)
通訊地址 Address	室 Room 樓 Floor 座 Block	大廈名稱 Building name	
	街道編號及名稱 Street no. and street name		地區 District
電郵 Email	聯絡電話 Contact no.	傳真 Fax	
機構名稱 Name of company		職銜 Position	

捐款資料 Donation information	
<input type="checkbox"/> 單次捐款 One-off donation	<input type="checkbox"/> 每月捐款 Monthly donation
捐款金額 Donation amount:	<input type="checkbox"/> HK\$5,000 <input type="checkbox"/> HK\$1,000 <input type="checkbox"/> HK\$500 <input type="checkbox"/> HK\$100 <input type="checkbox"/> HK\$_____ (其他捐款金額 Other donation amount)

支持特定服務類別 Support a particular service type or project:

一般捐款 General donation  幼兒服務 Child care service  青少年服務 Children & youth service  家庭服務 Family service

安老服務 Elderly service  復康服務 Rehabilitation service  澳門社會服務 Macau social service  心意行動 Act of LOVE

「全心全意」家庭發展計劃 "Walk with Love" Family Development Project  聖公會中風復康慈善基金 Sheng Kung Hui Stroke Rehabilitation Charity Fund

「恩澤膳」短期食物援助服務計劃 "Blessed Food" – Short-term Food Assistance Scheme

指定單位 (如希望捐款予指定單位, 請註明 If you would like to support specific unit, please specify: \_\_\_\_\_)

其他 Others (如希望捐款予指定用途, 請註明 If you would like to support specific project, please specify: \_\_\_\_\_)

捐款港幣 100 元或以上將獲發收據作申請減免稅項之用。請發收據抬頭: \_\_\_\_\_。

Official receipt will be issued for donation of HK\$100 or above for tax deduction purpose. Please issue receipt with name \_\_\_\_\_.

為節省行政資源, 每月捐款人士的總捐款額收據將於每年財政年度完結後寄發。  
To minimize our administrative process, official receipt for the total contribution of monthly donor will be issued at the end of each fiscal year.

捐款方法 Donation Methods	
<input type="checkbox"/> 以劃線支票捐助 (抬頭:「香港聖公會福利協會有限公司」) Cross cheque made payable to: "Hong Kong Sheng Kung Hui Welfare Council Limited"	銀行 Bank: _____ 支票號碼 Cheque no.: _____
<input type="checkbox"/> 直接存款 / 轉賬入下列「香港聖公會福利協會有限公司」 Bank in to either of the following accounts:	銀行戶口 Bank account - 恒生銀行 Hang Seng Bank: 024-255-757999-883 或 or 東亞銀行 Bank of East Asia: 015-514-10-407766-1
<input type="checkbox"/> 繳費靈: 請致電 18033 或瀏覽 <a href="http://www.ppskh.com">www.ppskh.com</a> 捐款, 商戶編號為「6299」(備忘編號: _____)	PPS: Please dial 18031 or visit <a href="http://www.ppskh.com">www.ppskh.com</a> to donate, Merchant Code: 6299 (Payment ref. no.: _____)
<input type="checkbox"/> 便利店一次性捐款: 請攜同捐款條碼(右圖)到全港任何一間 OK 便利店以現金捐款 (金額上限為港幣 5,000 元正; 完成後請保留交易紀錄。)	Present this barcode (right) to any Circle K Convenient Store (Maximum donation amount HKD 5,000. Please keep receipt)
<input type="checkbox"/> 自動轉賬 (適用於每月定期捐款): 請於香港聖公會福利協會有限公司網站: <a href="http://www.skhw.org.hk">www.skhw.org.hk</a> 下載及填妥「直接付款授權書」, 連同此表格遞交。	Auto-pay (For monthly donation): Please visit: <a href="http://www.skhw.org.hk">www.skhw.org.hk</a> , download and fill in the form "Direct Debit Authorization", submit with this donation form.
<input type="checkbox"/> 本會網上捐款已啟用, 有關詳情請瀏覽香港聖公會福利協會有限公司網址: <a href="http://www.skhw.org.hk">www.skhw.org.hk</a>	For online donation, please visit our web site at <a href="http://www.skhw.org.hk">www.skhw.org.hk</a>
<input type="checkbox"/> 信用卡 (適用於每月定期捐款 及 單次捐款) Credit card (For monthly donation and one-off donation):	選擇信用卡贊助者必須填妥下列「信用卡付款授權書」。 For credit card donation, donors must fill out the below "Credit card payment authorization".



999964601252134571

信用卡付款授權書 Credit card payment authorization:	
<input type="checkbox"/> 本人現授權銀行於本人信用卡賬戶內支付港幣_____元作為香港聖公會福利協會有限公司的每月捐款, 本人之信用卡有效期過後及獲發新卡後仍繼續生效, 直至另行通知。	I hereby authorize my bank to debit my credit card account to make a monthly donation of HK\$_____ to Hong Kong Sheng Kung Hui Welfare Council Limited continuously after the expiry date of the credit card and with the issuance of a new credit card until further notice.
<input type="checkbox"/> 本人現授權銀行於本人信用卡賬戶內支付港幣_____元作為香港聖公會福利協會有限公司的單次捐款。	I hereby authorize my bank to debit my credit card account to make a one-off donation of HK\$_____ to Hong Kong Sheng Kung Hui Welfare Council Limited.
信用卡持有人姓名 Name of credit card holder (請填上信用卡上之英文姓名 Please fill in the English name used on credit card): _____	
信用卡 Credit card:	<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD
發卡銀行 Issuing bank:	信用卡號碼 Credit card account no.: _____
信用卡持有人簽署 Signature of cardholder*:	有效日期至 Card expiry date: _____月 Month _____年 Year
*簽署必須與上述信用卡戶口簽名式樣相同 Signature should correspond to specimen signature of above specified credit card account	

授權使用個人資料作推廣事宜 Authorization for the use of personal data for direct marketing	
<input type="checkbox"/> 本人同意讓香港聖公會福利協會有限公司使用我的個人資料, 透過以下不同通訊渠道通知本人香港聖公會福利協會有限公司之各項籌款活動、定期通訊、義工服務及意見收集之用。	I agree that Hong Kong Sheng Kung Hui Welfare Council Limited can use my personal data to keep me posted of the Welfare Council's fund-raising events, newsletters, volunteer services and surveys to collect donor opinions through various communication channels.
- 個人資料包括: 姓名、電話號碼、傳真號碼、電郵地址、通訊地址等; 使用的通訊渠道包括: 郵遞、電郵、圖文傳真、電話及電話短訊等	My personal data include my name, telephone number, fax number, email and mailing address, etc. Communication channels include direct mail, email, facsimile, telephone and SMS.
<input type="checkbox"/> 本人不同意香港聖公會福利協會有限公司使用本人的個人資料作上述用途。	I do not agree Hong Kong Sheng Kung Hui Welfare Council Limited to use my personal data for the above purposes.

請於適當方格內加上✓號以表示您的意願。Please tick the appropriate box to indicate your preference.

倘若日後您希望停止接收本會的宣傳推廣或最新資訊, 您可隨時以書面或電郵要求本會停止使用您的個人資料作上述用途而無須支付任何費用。(地址: 香港灣仔堅尼地道 112 號 12 樓 電郵: ho@skhw.org.hk)

If you do not wish to receive any promotional and marketing materials or updates from the Welfare Council in future, upon receipt of your written request, either by post or by email, at any time and with no charge, the Welfare Council will cease to use your personal data for the above purposes. (Address: 12/F, 112 Kennedy Road, Wan Chai, HK Email: ho@skhw.org.hk)

簽署 Signature: \_\_\_\_\_ 姓名 Name: \_\_\_\_\_ 日期 Date: \_\_\_\_\_

請選擇通訊語言 Please choose preferred language for communications:  中文  English

表格遞交 Form submission	
請將此表格連同劃線支票/銀行入數紙正本/直接付款授權書(如適用)郵寄至香港聖公會福利協會有限公司財務部。	
Donation form together with crossed cheque/ original bank-in slip/ Direct Debit Authorization form (if applicable) can be mailed to our Finance Department.	
地址: 香港灣仔灣興民街 68 號海天廣場五樓 Address: 5/F, Marina House, 68 Hing Man Street, Shau Kei Wan, Hong Kong	
查詢電話 Enquiry: (852) 2521 3457 傳真 Fax: (852) 2523 4846 電郵 Email: ho@skhw.org.hk	