



一次性捐款表格 One-off Donation form

我樂意一次性捐款 I would like to make a one-off donation:

- HK\$500 HK\$800 HK\$1500 HK\$3000 HK\$_____ (其他金額 Other amount)

捐款者資料 Donor's Information:

- 個人捐款 Personal Donation 公司捐款 Corporate Donation

姓名/公司名稱 Name / Company Name _____ (先生 Mr. / 女士 Ms.)

聯絡人 Contact Person _____

地址 Address _____

聯絡電話 Tel _____ 電郵 E-mail _____

是否需要收據? Send receipt? 是 Yes 否 No

收據抬頭 Name on Receipt 同上 Same as above _____

捐款方法 Donation Method:

信用卡 Credit Card VISA MASTER

信用卡號碼

信用卡有效期至

Card No. : |_|_|_|_| |_|_|_|_| |_|_|_|_| |_|_|_|_| Card expiry date : _____月 month / _____年 year

持卡人姓名 Cardholder's name : _____

持卡人簽名 Cardholder's signature : _____

劃線支票 Crossed Cheque

抬頭請寫「香港復康會」 Payable to "The Hong Kong Society for Rehabilitation"

直接存入滙豐銀行戶口 Direct Transfer to HSBC account: **110-838281-838**

請將表格及銀行入數紙寄回本會 Please send us this form with the original bank receipt

備註 Remarks:

1. 請將填妥表格寄回、傳真或電郵至香港復康會。Please complete the form and return to The Hong Kong Society for Rehabilitation.

地址：香港九龍藍田復康徑7號 香港復康會藍田綜合中心1樓 傳訊及資源拓展部

Address: Communication & Resource Development Department, 1/F, HKSR Lam Tin Complex, 7 Rehab Path, Lam Tin, Kowloon, Hong Kong

傳真Fax: 2855 1947 電郵Email: hksrcrd@rehab society.org.hk

2. 捐款港幣100元以上可獲慈善捐款收據，作申請扣稅。Charitable donation receipt will be issued for donations of HKD100 or above for you to claim tax deduction.

此表格上之個人資料會保密處理，本會將用作開發及寄回收據、聯絡及通訊之用，本會將透過直接郵遞、電郵、電話及短訊等途徑，向您提供有關本會最新動向、服務推廣、招募義工及籌募活動資訊，以及用作收集意見等用途。All personal information collected in this form will be treated as strictly confidential & will be used for receipting, communication and further correspondence as donor of HKSR. HKSR may send you the most updated information relating to our services, development, volunteer recruitment & fundraising campaigns and conducting survey for HKSR through various channels such as direct mailing, e-mail, SMS or telephone, etc. 如你不同意上述有關本會使用個人資料的安排，請於後方空格加「✓」，然後簽署。 我不同意上述有關使用個人資料的安排 If you disagree on the proposed use of your personal data as stated above, please tick the next box and then sign. I object to the use of my personal data as stated above.

簽署 Signature _____