



## 捐款表格 Donation Form

致：香港盲人輔導會  
九龍深水 南昌街248號

To: The Hong Kong Society for the Blind  
248 Nam Cheong Street, Shamshuipo, Kowloon.

\*本人/機構願意作出 \*  一次性 /  每月 /  每年 捐贈 港幣 \_\_\_\_\_ 元作為下列用途：

\*I/Our organization wish to make a \*  one-off /  monthly /  annual  
donation of HK\$ \_\_\_\_\_ for the following charity purpose(s):

<input type="checkbox"/> 視覺醫療服務 Vision Health Services	<input type="checkbox"/> 展能及長者院舍服務 Capacity Building and Elderly Residential Services
<input type="checkbox"/> 教育及社區支援服務 Education and Community Support Services	<input type="checkbox"/> 就業支援服務 Employment Support Services
	<input type="checkbox"/> 一般捐款 General Donation

請發收據抬頭予 Please issue receipt to: \_\_\_\_\_

### 捐款人資料 Donor's Information (請用正楷填寫 PLEASE USE BLOCK LETTERS)

個人/機構名稱:  
Name/Organization: \_\_\_\_\_

通訊地址:  
Correspondence Address: \_\_\_\_\_

聯絡人: \_\_\_\_\_ \*先生/太太/女士/小姐 職業:  
Contact Person: \_\_\_\_\_ \*Mr/Mrs/Ms/Miss Occupation: \_\_\_\_\_

聯絡電話: \_\_\_\_\_ 住宅 / 辦公室電話  
Contact Telephone: \_\_\_\_\_ Home/Office Telephone: \_\_\_\_\_

電郵地址: \_\_\_\_\_ 傳真號碼:  
E-mail Address: \_\_\_\_\_ Fax: \_\_\_\_\_

個人/機構負責人簽署: \_\_\_\_\_ 日期:  
Signature of Individual/Officer-in-charge: \_\_\_\_\_ Date: \_\_\_\_\_

### 捐贈方法 Donation Methods

<input type="checkbox"/> 支票：支票抬頭請寫「香港盲人輔導會」 By cheque: Payable to "THE HONG KONG SOCIETY FOR THE BLIND"	<input type="checkbox"/> 直接存入匯豐銀行戶口號碼 (004) 050-000348-001 By Direct Transfer to HSBC Account No. (004) 050-000348-001
<input type="checkbox"/> 信用卡付款 By Credit Card	<input type="checkbox"/> <input type="checkbox"/>
持咭人姓名 Cardholder's Name _____	信用卡號碼 Credit Card No. _____
到期日 Expiry Date _____	簽署 Signature _____

本人不同意香港盲人輔導會聯絡本人進行任何直接籌募及服務推廣等工作。  
I do not wish to be contacted by The Hong Kong Society for the Blind for any donation appeal and services promotion purpose.

本人聲明此捐款表格所提供之個人資料乃出於自願及正確，並同意貴會向有關方面核實該等資訊。本人同意貴會可持有、儲存及使用該等資料用作通訊及寄發收據用途。本人亦可隨時向貴會查閱及修訂上述資料。  
I declare that the personal data provided above are accurate and are provided by me voluntarily. I agree that The Hong Kong Society for the Blind may check the data with the relevant authorities concerned. I agree that your Society may keep, store and use those data for communication and issuance of receipt. At the same time, I may check and update those data with your Society from time to time.

For any enquiry of the Society's Personal Privacy Policy, please send to its correspondence address or email to enquiry@hksb.org.hk

### 查詢 Enquiries

電話 Tel: 3723 8211 傳真 Fax: 2788 0040 電郵 E-mail enquiry@hksb.org.hk 網址 Websitewww.hksb.org.hk

備註 Remarks: 1. \*請刪去不適用項目 Please delete whichever is inappropriate. 2. 請在適當方格填上 Please tick the appropriate box. 捐款港幣100元或以上可憑收據申請  
免稅 Donation of \$100 or above is tax-deductible. 4. 所有個人資料將保密處理 Your personal information provided will be kept in strict confidence.