

我願意作單次捐款 I would like to make a one-off donation of :

HK\$2,000 HK\$1,000 HK\$500 HK\$200 _____ (其他捐款金額 Other donation amount)

一般捐款 General Donation 支持項目 Donation Programme: _____

我願意成為每月捐款者 I would like to be a monthly donor : (只限信用卡及AlipayHK & Credit card only)

HK\$200 HK\$300 HK\$500 HK\$1,000 _____ (其他捐款金額 Other donation amount)

捐款者資料 Donor's Information

姓名Name	(姓Last) _____ (名First) _____ (先生Mr./女士Ms./太太Mrs.)	中文姓名 Chinese Name	_____
公司 Company / 機構 Organisation	聯絡人 Contact Person	職銜 Title	_____
地址 Address	聯絡電話 Contact no.	_____	_____
	出生日期 Date of Birth	日 D D / 月 M M / 年 Y Y Y Y	_____
電郵 Email			<input type="checkbox"/> 我要匿名捐款 I wish to stay anonymous
捐款收據名稱 Name on receipt	* 如與上述不同 If different from above	鳴謝名稱 Name to be acknowledged	* 如與上述不同 If different from above
請選擇通訊語言 Please choose preferred language for communications: <input type="checkbox"/> 中文 <input type="checkbox"/> English			

是否需要收據 Receipt required 否 No 是 Yes [郵寄post / 電郵Email / 親臨中心領取 collect in person at Centre (請刪去不適用者。Delete as appropriate.)]
請填妥表格後連同捐款證明以電郵或郵寄方式交回銘琪癌症關顧中心，以便發出捐款收據。

Please send the donation proof together with this form by email or by post to Maggie's Centre for a donation receipt.

捐款方法 Donation Methods

直接存款 Direct Transfer (轉數快 FPS : 109334839)

滙豐銀行 HSBC : 808-327399-292

(美琪凱瑟克癌症關顧中心基金有限公司 Maggie Keswick Jencks Cancer Caring Centre Foundation Limited)

劃線支票 Crossed Cheque (支票號碼 Cheque No. : _____)

支票抬頭請寫上「銘琪癌症關顧中心」 Please make the cheque payable to "Maggie's Cancer Caring Centre"

信用卡 Credit Card VISA MASTERCARD

持卡人姓名 Cardholder's name	_____	持卡人簽署 Cardholder's Signature	_____
信用卡號碼 Credit Card no.	_____	有效日期 Expiry Date (有效日期最少兩個月內有效 Expiry date is valid for at least two months)	____ 月 M ____ 年 Y

網上捐款
Online Donation



捐款總額港幣一百元或以上可申請扣減稅項。Donations of HK\$100 or above are tax deductible.

銘琪癌症關顧中心(中心)會盡力遵守《個人資料(私隱)條例》(條例)中所列載的規定，確保儲存的個人及機構資料準確無誤，及有妥善的儲存方法。為保障資料當事人/所屬機構的利益，本中心收集有關資料作有關捐款事宜、發收據及活動報名用途；以及可能運用你/機構資料(包括機構名稱、聯絡人姓名、電話、電郵及郵寄地址)，以便本中心日後與你通訊、籌款、作活動邀請或收集意見的推廣用途。你亦可以隨時要求本中心停止使用你/機構的資料作上述推廣。日後查閱或更新資料，請隨時致電2465 6006。

Maggie's Cancer Caring Centre ("Maggie's Centre") undertakes to comply with the requirements of the Personal Data (Privacy) Ordinance to ensure that personal/corporate data kept are accurate and securely kept. To safeguard interest of our data subject, Maggie's Centre collects personal & corporate data from you for the purposes of handling donations, issuing receipts, and registration, and may use your personal/corporate data (company name, contact person, telephone number, email and mailing addresses) for the purposes of providing you with information of Maggie's Centre, fundraising appeal, activities invitation as well as for feedback collection and related promotion purposes. Upon your request at any time, we will cease to use the personal & corporate data for promotion purposes. You may contact us at 2465 6006 for enquiry or information update.

本人不願意接收銘琪癌症關顧中心的資訊 I do not wish to receive information from Maggie's Cancer Caring Centre

地址 Address : 新界屯門青松觀路屯門醫院銘琪癌症關顧中心 Maggie's Cancer Caring Centre, Tsing Chung Koon Road, Tuen Mun Hospital, N.T., HK

電話 Telephone : 2465 6006 傳真 Fax : 2465 6063 電郵 Email : fundraising@maggiescentre.org.hk 網址 Website : www.maggiescentre.org.hk