



捐款表格 Donation Form

致：香港盲人輔導會
九龍深水埗南昌街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"/> 視障人士點字書 / 電子書製作 Braille Book / eBook Production	<input type="checkbox"/> 視障人士圖書館及口述影像服務 Library and Audio Description Services for the Visually Impaired
<input type="checkbox"/> 視障人士資訊科技設備 Information Technology Equipment for the Visually Impaired	<input type="checkbox"/> 就業輔導服務 Employment Services
<input type="checkbox"/> 低視能服務 Low Vision Services	<input type="checkbox"/> 視障長者服務 Services for the Aged Blind
<input type="checkbox"/> 視聽障人士服務 Services for the Deafblind	<input type="checkbox"/> 其他(請註明) Others (please specify) _____

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

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"

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

信用卡付款 By Credit Card VISA MasterCard

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。任何有關香港盲人輔導會私隱政策的查詢，可透過本會通訊地址或以電郵 enquiry@hksb.org.hk 提出。

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 8338 傳真 Fax : 2788 0040 電郵 E-mail : genadmin@hksb.org.hk 網址 Website : www.hksb.org.hk

備註 Remarks : 1.* 請刪去不適用項目 Please delete whichever is inappropriate. 2. 請在適當方格加上✓號 Please tick the appropriate box. 3. 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.