

# 扶康會定期捐款計劃

## Fu Hong Society's Monthly Donation Scheme

本會推廣「定期捐款計劃」，旨在招募熱心人士長期支持本會服務。您只需每月捐款低至港幣五十元，即可獻上無限愛心，協助本會拓展殘疾人士服務。請即填妥下列表格，寄回 扶康會傳訊及資源發展部（地址：扶康會賽馬會石圍角工場（傳訊及資源發展部）新界荃灣石圍角邨二號停車場地下）。如有任何查詢，歡迎致電 2745 4214 或電郵至 [comms@fuhong.org](mailto:comms@fuhong.org)。請立即行動，支持殘疾人士！

### 我願意幫助殘疾人士

I'd like to help persons with disabilities

我想每月定額捐款

I want to donate monthly:

HK\$500  HK\$200  HK\$50  其他 Other Amount HK\$ \_\_\_\_\_

(請填寫右面的自動轉賬授權書或以信用卡捐款)

(Please fill in the autopay form or your credit card information below)

### 捐款者資料 Donor's Information

(請盡量以正楷填寫 IN BLOCK LETTERS)

姓名 Name: \_\_\_\_\_

地址 Address: \_\_\_\_\_

聯絡電話 Tel: \_\_\_\_\_ 電郵 E-mail: \_\_\_\_\_

### 信用卡捐款 Donation by Credit Card

VISA Card  Master Card

持卡人姓名 Cardholder's name: \_\_\_\_\_

信用卡有效期至 Card expiry date: \_\_\_\_\_

信用卡號碼 Card number: \_\_\_\_\_

持卡人簽署 Cardholder's signature: \_\_\_\_\_

每月捐款將在信用卡到期日後自動延續，直至閣下另行通知為止。倘若閣下想停止每月捐款，請致電本會 2745 4214。Upon expiry and renewal of a credit card, monthly donations will continue unless notified otherwise. If you wish to cease the monthly donation, please contact our Society 2745 4214.

信用卡捐款可傳真至 2361 2053

Credit Card donation can be made by faxing this slip to 2361 2053

(捐款港幣一百元以上可憑收據申請扣減稅項)

(Donations of HK\$100 or above are tax deductible with a receipt)

扶康會(以下簡稱「本機構」)會按照《私隱政策聲明》的規定處理及儲存您的個人資料，絕不會向第三方出售及/或提供您的個人資料。本機構擬使用您的個人資料(包括：姓名、地址、電話、電郵及傳真等等)為日後向您提供有關本機構最新動向、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。如您不同意，請在以下空格內加上「✓」號。您有權隨時向本機構查詢、更改或要求停止使用您的個人資料作上述推廣用途，請於辦公時間致電 2745 4214 與傳訊及資源發展部傳訊主任聯絡。Fu Hong Society (hereinafter referred to as "the Society") shall comply with the Privacy Policy Statement in handling and keeping your personal data. The Society will not sell and/or provide your personal data to any third party. The Society intends to use your personal data (including name, address, telephone no., email and fax no., etc) for future correspondences, promotional activities, volunteer recruitment and fund-raising appeals, and feedback collection purposes. If you do not agree to the use of your personal data for the above purposes, please indicate by putting "✓" in the box below. You have the right to access, correct and request the Society to stop using your personal data for the above purposes at any time, please contact our Communications and Resources Development Officer by phone 2745 4214 during office hours.

如您不同意上述有關本機構使用個人資料的安排，請於後方空格格加「✓」，然後簽署。If you disagree on the proposed use of your personal data as stated above, please put "✓" in the box and then sign.

本人不同意上述有關使用個人資料的安排 I object to the use of my personal data as stated above.

簽署 Signature: \_\_\_\_\_

本人已閱讀、了解及接納本機構有關收集、使用及提供個人資料的通知。

本機構《收集個人資料聲明》及《私隱政策聲明》詳見本機構網頁 [https://www.fuhong.org/important\\_notice.aspx](https://www.fuhong.org/important_notice.aspx)

I have read, understood and accepted the statement regarding the collection, use and provision of personal data by the Society.

Visit the Society's site [https://www.fuhong.org/important\\_notice.aspx](https://www.fuhong.org/important_notice.aspx) for full context of the Society's Personal Information Collection Statement and Privacy Policy Statement.

### 自動轉賬授權書

Autopay Authorisation Form

請寄回表格正本，任何塗改請簽名以示確認。

Only originals are accepted. Any alteration requires signature.

Name of party to be credited (The Beneficiary) 收款之一方(受益人)	Bank no. 銀行編號	Branch no. 分行編號	Account no. to be credited 賬戶號碼
Fu Hong Society 扶康會	01014	11119	01122821101012

本人/吾等現授權本人/吾等之上述銀行，(根據受益人或其往來銀行不時給予本人/吾等銀行之指示)自本人/吾等之賬戶內轉賬予上述受益人。惟每次轉賬金額不得超過以上指定之限額。  
本人/吾等同意本人/吾等之賬戶出現透支(或令現時之透支增加)，本人/吾等願共同及各別承擔全部責任。  
如因該等轉賬而令本人/吾等之賬戶並無足夠款項支付該等授權轉賬，本人/吾等之銀行有權不予轉賬，且銀行可收取催索之收費，並可隨時以一星期書面通知取消本授權書。  
本授權書將繼續生效直至另行通知為止或截止上列到期日為止(以兩者中最早之日期為準)。  
本人/吾等同意，本人/吾等取消或更改本授權書之任何通知，須於取消/更改生效日最少兩個工作天之前夕交予本人/吾等之銀行。

I/We hereby authorise my/our below named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated above.  
I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfers.

I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorisation at any time on one week's written notice.

This authorisation shall have effect until further notice or until the expiry date written above (whichever shall first occur).

I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect.

1. * My/our full name(s) as recorded on Statement/ Passbook 本人/吾等在結單/存摺上所紀錄之名稱			
2. My/our full address 本人/吾等之地址			
3. Bank 銀行名稱			
4. Limit for Each * Payment/Month 每次/月付款之限額 HK\$ _____			
5. Bank no. 銀行編號	Branch no. 分行編號	My/ Our account no. (HK\$) 本人/吾等之賬戶號碼	
6. Contact tel.no. 聯絡電話			
7. *Expiry Date 到期日	Day 日	Month 月	Year 年
8. *My/our signature (s) 本人/吾等之簽名			

For Official Use Only 此欄不用填寫

For our Society use 由本會填寫 Debtor's reference 檔案編號	For bank use 由銀行填寫	Signature verified 簽名式樣
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\* 請以英文正楷填寫。Please write in block letters.

# NOTES 附註：

1. 如每項付款之數額每次可能不相同，則請將最高者定為每次付款之最高限額。

If the amount of your payments are likely to vary each time, set the Limit for Each Payment at the maximum amount you would expect to pay at any one time.

2. 本自動轉賬授權書將於「到期日」一欄中所填寫之日期自動撤銷。如貴戶意欲自動轉賬授權書無限期有效(或直至貴戶予以撤銷為止)，則請將該欄留空。

This Auto pay Authorisation will be cancelled automatically on the date included in the box marked "Expiry Date". If you wish the Auto pay Authorisation to have effect indefinitely (or until cancelled by you) please leave box blank.

3. 請保證 貴戶在此授權書內之簽名，與銀行賬戶所簽者完全相同。

Please ensure that you sign the form in the usual way that you would sign on your Bank Account.

4. 在債務人的參考欄內，請將貴戶與受款一方之關係，略為說明。例如學生編號、抵押合約號碼等。

In the box marked "Debtor's reference" enter the identifying reference between yourself and the party to be credited i.e. Student No., Rental Agreement No., etc.

5. 如「每次/月付款之限額」欄未有填上，債務銀行會將付款限額設定為「不設上限」。

If # limit for Each payment / Month is not specified, the debtor's bank will set the limit as "unlimited".

查詢 Enquiries: 2745 4214

多謝您們的支持!

Thank you for your support!