

Remarks:







## 每月捐款表格 MONTHLY DONATION FORM

請把填妥的表格郵寄、電郵或傳真致本會。 Please send back the completed	form by post, email or by fax.			
個人資料 PERSONAL INFORMATION(新	青以正楷填寫 Please write in B	LOCK letters )		
先生Mr 英文姓名	中文姓名			
	=====================================			
聯絡電話 Contact No:	电野 Email:			
通訊地址				
Correspondence Address:(室Flat / Room)	(樓 Floor) (座 Block	<) (	大廈Mansion / Building )	
(屋苑 / 街道 Estate / Street / Road )				
□ □ L c	7 據抬頭 □ 同上 Same as ab <mark>ove</mark>			
Name of Receipt: (先生Mr / 女士Ms)				
每月捐款金額 MONTHLY DONATION AMOUNT(捐款港幣100元或以上可申請扣稅 Donation over HK\$100 is tax deductible)				
捐款約於每月10號過數,首次過數可能會在月底進行。若於當日未能成功過數,捐款將會在該月底再次嘗試。 Monthly donations will normally be transacted on the 10th of each month (The first transaction may possibly be transacted at the end of the month). If first attempt is unsuccessful, a second attempt will be processed at the end of that month.				
☐ HK\$200 ☐ HK\$500 ☐ HK\$500 ☐ HK\$				
☐ 信用卡 Credit Card: ○ VISA ○	MasterCard American	UnionPay EREX		
信用卡號碼		有效日期	B	
	Card Expiry Date : 月MM 年 YY (必須於3個月內有效 Valid for at least 3 months )			
持卡人姓名 Cardholder's Name:	發卡銀行 Card Issuing Bank:			
+± F   Ø 99				
持卡人簽署 Cardholder's Signature:				
□ 銀行自動轉賬賬戶 Bank Autopay Account				
本人(等)在結單/存摺上所記錄之名稱 My/Our Name as recorded on Statement/Passbook		銀行編號 分行編號	(收款人) Name of party to be credited (the Beneficiary)	
先生/女士 Mr/Ms		Bank No.   Branch No.     Branch No.	Account No. to be credited 3   4   8   8   2   2   0   0   2	
		銀行名稱 Bank Name		
	(等)之賬戶號碼 Our Account No.	香港身份證號碼 HKID No.	本人(等)之簽名 My/Our Signature(s)	
本人(等)現授權本人(等)之上述銀行(該「銀行」),根據協康會隨時給	予該銀行之指示,自本人(等)上述戶口內	    轉賬予協康會,並同意本人(等)之銀行毋須	 證實該等轉脹通知是否已交予本人(等)。如因該等轉脹而令本人(等)之上	
述照戶出現透支(咸令現時之透支額增加),本人(等)會共同及各別承擔全部責任。本人(等)確避在本自動轉賬授權書內之簽名,與本人(等)上述戶口所簽署者完全相同。本人(等)同意如上述支賬戶口有任何更改或取消是項自動轉 賬付款方式時,需通知協康會。同時如上述戶口並無足夠款項支付該等轉脹,該銀行有權不予辦理轉脹且可收取有關之手續費用,該等費用概由本人(等)支付。本自動轉脹授權書將繼續往往效直至另行通知為止。本人(等)同意取 消或更改本授權書之任何通知,須於取消或更改生效日期最少兩個工作天前交予該銀行。並同時通知協康會。本人(等)確證以上資料正確無誤。如有錯誤,本人(等)會共同承擔全部責任。				
IWe hereby authorise my/our Bank named above (the "Bank") to effect transfer from my/our above-mentioned account to that of Heep Hong Society in accordance with such instructions as the Bank may receive form Heep Hong Society from time to time. I/We agree that the 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 above-mentioned account to be debited for the transfer(s). I/We agree to notify Heep Hong Society of any change of bank account				
or cancellation of payment method and further agree that should there be insufficient funds in mylour above-mentioned account to meet any transfer hereby authorised, the Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may make the usual service charge to be paid by melus. This authorisation which sall be given at least two working days prior to the date on which such cancellation or variation of this authorisation which live may give to the Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect and at the same time such notice shall be given to Heep Hong Society. IVWe joinfly and severally accept full responsibility for any incorrect information given above.				
收集個人資料聲明 Personal Information Collection Statement:	rgiron to neep nong codety. Evro jointly and co	torally account and responsionally for any meetinest line	grow decree	
協康會嚴格遵守及履行個人資料(私隱)條例之規定,並確保你的個人資料的準確性及安全性。你的個人資料(包括你的姓名、電郵、住址及電話等)或會被本會用作聯絡通訊、籌款、處理捐款、推廣活動、研究調查及其他通訊 及推廣之用途。若你日後不欲收取本會的推廣資訊,請將姓名、聯絡電話及電郵,電郵至donor.services@heephong.org,以安排相關刪除手續。如有查詢,請聯絡「童途有您」專線 3618 6320。				
	ppeals, donation processes, event invitations, sur	rveys and other communication and marketing mat	mation (including name, email address, mailing address, phone no., etc.) may be used by erials to you via telephone, post and/or electronic mails. If you do not wish to receive any ies, please contact our donor services hotline 3618 6320.	
□ 本人同意向協康會提供以上個人資料作以上用途。 I agree to provide my personal data for the above purposes.				
通訊語言 Language Preference: 中文 Chinese 通訊方式 Communication Preference: 電郵 E-Mail	<ul><li>□ 英文 English</li><li>□ 郵寄 Post</li></ul>			
確認簽署 Signature:				
衷心感謝您的慷慨支持! With deepest thanks for your generous support! 總辦事處地址 Head Office Address: 香港九龍觀塘海濱道133號萬兆豐中心10樓 J - L 室 Units J-L, 10/F, MG Tower, 133 Hoi Bun Road, Kwun Tong, Kowloon				
「童途有您」專線 Donor Services Hotline: (852) 3618 6320 傳真 Fax: (852) 2776 1837 電郵 Email: donor.services@heephong.org				
Form Received Date :	Official Debtor's Reference :	al Only	Payment No. :	
TOTAL NECEIVED DALE.	Denior S Reference:	; -	ayınıcılı NO	









## 捐款計劃 Monthly Donation Programme

協康會於1963年成立,為一間非牟利的社會服務機構,一直致力協助有特殊需要的兒童在愉快的環境下健康成長、 盡展所能。現時本會透過全港逾 50 個服務單位,每年服務逾 15,000 個家庭,為自閉症、讀寫障礙、專注力失調/過度活躍 症等發展上有障礙的兒童,提供專業的訓練、治療及家庭支援服務。

「童途有您」月捐計劃的捐款主要用作發展非政府資助的項目和活動,包括資助家長資源中心的營運,支援育有發展障礙 子女的家長。

Heep Hong Society is a non-profit charitable organisation founded in 1963 with the mission of helping children with special needs develop their potential. Operating over 50 service units throughout Hong Kong and serving over 15,000 families each year, Heep Hong is committed to providing professional care, education and training services to children and young adults who have developmental problems such as autism, dyslexia and attention deficit/hyperactivity disorder. We also provide support services for families of these children.

Donations contributed by monthly donors are used to sustain the operation of Parents Resource Centres and provision of non-subvented services in support of parents of children with special needs.





請貼上郵票 **AFFIX YOUR** STAMP HERE

香港九龍觀塘海濱道133號萬兆豐中心10樓 J-L 室 協康會總辦事處

## 「童途有您」捐款計劃

**Heep Hong Society** 

Units J-L, 10/F, MG Tower, 133 Hoi Bun Road, Kwun Tong, Kowloon, Hong Kong

**Attn: Monthly Donation Programme**