



**癌症基金會**  
**CANCERFUND**

請填妥下列表格，並寄回香港癌症基金會，簡便回郵十號（如在本港投寄毋須郵票）或傳真致本會 3667 2100。

Please complete the form below and return to us by post to Hong Kong Cancer Fund, Freepost No. 10 (No stamp required if post within Hong Kong) or by fax 3667 2100.

通訊語言選擇（請選其一） Language preference (Selected one only)  English  中文

我願意加入癌症基金會之友，每月定期捐款 **Yes, I would like to join Circle of Friends and make a monthly donation of:**

HK\$1,000  HK\$500  HK\$300  HK\$200  HK\$ \_\_\_\_\_

**個人資料 Personal Information**

英文姓氏 Surname (先生 Mr. / 太太 Mrs. / 小姐 Ms.): \_\_\_\_\_

英文名字 Given Name: \_\_\_\_\_ 中文名字 Chinese Name: \_\_\_\_\_

地址 Address: \_\_\_\_\_

出生日期 Date of Birth: \_\_\_\_\_ 日 D \_\_\_\_\_ 月 M \_\_\_\_\_ 年 Y

日間聯絡電話 Daytime Tel. No.: \_\_\_\_\_ 手提電話 Mobile phone No.: \_\_\_\_\_

電郵 E-mail: \_\_\_\_\_ 傳真 Fax No.: \_\_\_\_\_

香港身份証號碼 HKID card No. / 護照號碼 PPT No.: \_\_\_\_\_

捐款者編號 Donor No. (曾捐款者適用 If applicable): \_\_\_\_\_

**捐款方法 Donation Methods : COF06W**

信用卡 Credit Card (請傳真至 Please fax to 3667 2100)

美國運通 Amex  Visa  萬事達 Mastercard

持卡人姓名 Cardholder's Name: \_\_\_\_\_

信用卡號碼 Card No.: \_\_\_\_\_ 簽發銀行 Card Issuing Bank: \_\_\_\_\_

有效日期 (兩個月內有效) Expiry Date (min. valid for 2 months): \_\_\_\_\_

持卡人簽署 Cardholder's Signature \_\_\_\_\_ 每月捐款將在信用卡到期後自動延續  
Monthly donation continues after card expiry until further notice given

\*捐款滿港幣一百元以上，可憑收據申請扣減稅項。 All donations of HK\$100 or above are tax deductible.

每月自動轉賬 Monthly Autopay (只適用於每月捐款 For monthly donation ONLY)

收款之一方 (受益人) Name of party to be credited (The Beneficiary)		銀行編號 Bank no.	分行編號 Branch no.	收款賬戶號碼 Account no.
<b>香港癌症基金會 HONG KONG CANCER FUND</b>		0   0   4	5   6   7	3   6   6   0   8   3   0   0   3
直至另行通知為止，本人 / 號 / 公司茲授權香港癌症基金會及下述銀行，由本人 / 號 / 公司之銀行帳戶內支付賬款。惟每次轉賬金額不得超過以下指定之限額。如因支付後，引致本人 / 號 / 公司賬戶透支，或增加透支金額，亦請照付。但銀行方面，則可因本人 / 號 / 公司之存款不足而拒予撥款，亦可因轉賬銀碼與下述銀碼不符時，拒予撥發。且銀行可收慣常之收費，亦可隨時以一星期書面通知取消本授權書。本人 / 號 / 公司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最少兩個工作天之前交與本人 / 號 / 公司之銀行。本人 / 號 / 公司同意本人 / 號 / 公司之銀行無證實該等轉賬通知是否已交付本人 / 號 / 公司。		Until further notice I/We hereby authorise HKCF to initiate and the Bank named below to process debits to my/our account notwithstanding that to do so may result in an overdraft or an increase in the overdraft on my/our account and provided further that the amount of each such transfer shall not exceed the limit indicated below. 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. 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 or variation is to take effect. I/We agree that our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.		
為方便電腦處理，以下資料以英文填寫 Please print (Please write surname first) 本人或吾等之姓 My / our full name(s) (先生 Mr. / 太太 Mrs. / 小姐 Ms.): _____				
銀行名稱 Bank Name:		銀行編號 Bank no.	分行編號 Branch no.	收款賬戶號碼 Account no.
香港身份証號碼 HKID card No. / 護照號碼 PPT No.		填表日期 Date of completing form		由本會填寫 Debtor's reference (For HKCF use)
捐款人簽署 Donor's Signature		本人授權香港癌症基金會每月由本人上述之銀行戶口轉賬指定金額以作每月捐款，直至另行通知。 I hereby authorise Hong Kong Cancer Fund to debit the monthly donation from my bank account as per the above. The authorisation will continue unless notice is given to Hong Kong Cancer Fund.		

我們非常樂意跟您分享本會的工作進展及最新消息。請選擇通訊方式:  電郵  郵件  不用，謝謝

We are keen to share with you our latest news & development on an on-going basis.

How would you like to receive this information:  Email  Post  No thanks

你的個人資料將保密處理，並只會用作捐款，捐助服務及通訊用途。

Your personal information will be treated as strictly confidential and use for donation, donor services and communication purpose only.

多謝你的慷慨捐助！如有任何疑問，歡迎致電「癌症基金會之友」熱線 3667 6332，或電郵致 cof@hkcf.org。

Thank you for your generosity. If you have any enquiries please call our COF Hotline 3667 6332 or email to cof@hkcf.org.