**DRESS PINK DAY 粉紅服飾日26.10.2018**

**ENROLMENT FORM參加表格**

* To donate to Dress Pink Day online or download this enrolment form, please visit [www.cancer-fund.org/pink](http://www.cancer-fund.org/pink)

如欲透過網上登記參加「粉紅服飾日」或下載此參加表格，請瀏覽[www.cancer-fund.org/pink](http://www.cancer-fund.org/pink)。

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| **PART 1 – DETAILS OF CONTACT PERSON 　1 – 聯絡人資料** |

Name of contact person聯絡人姓名 Mr/Mrs/Ms/Miss       先生/太太/女士/小姐

Surname 姓氏 Given name 名字

Position職銜

Telephone no. 電話       Email電郵

Address 地址

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| **PART 2 – YOUR SUPPORT 　2 – 您的支持** |

***Please complete parts 2 to 4 and return by mailing with the payment on or before 18 Oct 2018***

***請填妥此部份及第4部份「參加者資料」，連同捐款於2018年10月18日或之前以郵寄方式交回給我們。***

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|  **We will dress pink on 26 Oct and already have the participant list and donations ready.** **我們已完成參加者名單及籌集捐款，並將於10月26日穿戴粉紅服飾。** Actual number of participants 確實參加人數       Total donation amount 捐款總額 HK$     *\* Donors who donated HK$120 or above will receive a pink souvenir as a token of appreciation. 捐款港幣120元或以上之捐款人，我們將送上粉紅紀念品乙份，以答謝您的支持。* |

[ ]  **We are unable to participate in Dress Pink Day but would like to donate HK$      to support Hong Kong Cancer Fund’s FREE breast cancer care services.**

**我們未能參與「粉紅服飾日」但願意捐助港幣****元，以支持香港癌症基金會為乳癌患者提供免費支援服務。**

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| **PART 3 – PAYMENT METHOD 3 – 捐款方法 18 PINK IndG DP\_2014** |

[ ]  **Cheque支票** Cheque No. 支票號碼

(Please make cheque(s) payable to “Hong Kong Cancer Fund”. 支票抬頭請註明「香港癌症基金會」)

[ ]  **Credit Card信用卡**

[ ]  Amex美國運通 [ ]  Visa [ ]  MasterCard 萬事達

Cardholder’s name持卡人姓名

Card number信用卡號碼

Card issuing bank 發卡銀行

Expiry date有效日期       (min. validity for two months最少兩個月有效期)

Cardholder’s Signature持卡人簽署

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| **PART 4 – DETAILS OF PARTICIPANTS 第4部份–參加者資料** |

**ALL** the following information must be completed. Please write clearly in **BLOCK LETTERS**.

請提供以下**所有**資料，並以**英文正楷清楚**填寫。

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| --- | --- | --- | --- | --- |
|  | **Participant name 參加者姓名**(Surname first 請先填寫姓氏) | **Donation amount (HK$)****捐款金額** **(港幣)** | **Please put a ✓ if receipt is needed****如需收據請填上✓號** | **Receipt name收據抬頭人**(Surname first 請先填寫姓氏) |
|  | Company Name 機構名稱      |       | [ ]  |       |
| 1 |       |       | [ ]  |       |
| 2 |       |       | [ ]  |       |
| 3 |       |       | [ ]  |       |
| 4 |       |       | [ ]  |       |
| 5 |       |       | [ ]  |       |
| 6 |       |       | [ ]  |       |
| 7 |       |       | [ ]  |       |
| 8 |       |       | [ ]  |       |
| 9 |       |       | [ ]  |       |
| 10 |       |       | [ ]  |       |
| 11 |       |       | [ ]  |       |
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| 17 |       |       | [ ]  |       |
| 18 |       |       | [ ]  |       |
| 19 |       |       | [ ]  |       |
| 20 |       |       | [ ]  |       |

Please return this form to 請將此表格交回：

Hong Kong Cancer Fund, 2501 Kinwick Centre, 32 Hollywood Road, Central, Hong Kong | Fax: 3667 2100

香港癌症基金會 香港中環荷李活道32號建業榮基中心25樓2501室| 傳真：3667 2100

Or email to 或電郵至：

Dan Tan| dantan@hkcf.org | 3667 6374

Erica Yim| ericayim@hkcf.org | 3667 6383

**Notes**備註：

* Tax deductible receipts will only be issued to donors who donate HK$100 or more.

本會只向捐款達港幣100元或以上人士發放收據，可憑收據申請扣減稅項。

* Receipts and/or pink souvenirs will be sent to the contact person named in Part 1 by **the end of November 2018**. Please help to distribute receipts and/or pink souvenirs to participants, stocks permitting.

扣減稅項收據及/或「粉紅紀念品」將於**2018年11月底前**寄予第1部份之聯絡人，請代分發收據及/或「粉紅紀念品」予各參與者，送完即止。

* Please use a photocopy of this form if more space is needed.

如需更多表格請自行複印。

Your personal information will be treated as strictly confidential and used solely for handling your donation, issuing receipts, providing donor services, communication, appeal fundraising, feedback collection and inviting you to our health talks and relevant activities. You may refer to the Personal Data Collection Policy on our website for details.

您的個人資料將保密處理，並只會用作發出本會的捐款收據、會員服務及通訊、募捐、意見收集，並邀請您出席健康講座及相關的活動等用途。您可瀏覽本會網頁的收集個人資料聲明查閱有關詳情。

Tell us how you would like to receive our latest news and developments. 請選擇以何種途徑讓我們跟您分享本會的工作進展及最新消息。

[ ]  Post 郵遞 [ ]  Email 電郵

Language preference 通訊語言選擇 (Select one only 請選其一)

[ ]  English [ ] 中文

[ ]  I do not wish to receive information from Cancer Fund. 本人不願意接收香港癌症基金會的資訊。