Medical Assistance Fund-raising Programme Registration Form

(Please put a ✓ in the box or cross-out as appropriate)

Types of Donation

☐ **Monthly Donation**

☐ HK$1,000 ☐ HK$500 ☐ HK$100 ☐ Other _____

☐ **One-off Donation**

☐ HK$5,000 ☐ HK$3,000 ☐ HK$1,000 ☐ HK$500 ☐ Other _____

Personal Information

Name of Donor (Mr. / Ms. / Miss / Org) _____ (same as recipient of the receipt)

Name on receipt: ☐ Same as above ☐ Other _____ Name for acknowledgement: ☐ Same as above ☐ Other _____

Contact Person (for Group Donation) _____

Tel _____ Fax _____ Email _____

Correspondence Address _____

The above donation is referred by _____ (name of current Board Member of Po Leung Kuk) (if applicable)

To help us better allocate our resources, please indicate the channel from which you know about this programme:

☐ Advertisement on newspaper / magazine ☐ Article on newspaper / magazine ☐ Email ☐ Post ☐ Leaflet

☐ Social Media ☐ Online Advertisement ☐ Outdoor Advertisement ☐ Referred by a friend / family ☐ Other _____

Donation by

☐ **Crossed cheque** made payable to "Po Leung Kuk"

Name of Bank: _____ Cheque No. _____

☐ **Bank's pay-in slip (Original Copy)**

HSBC	A/C no. 002-239564-006
Hang Seng Bank	A/C no. 262-191166-001
Bank of China (Hong Kong)	A/C no. 012-875-00206767
Shanghai Commercial Bank	A/C no. 32882-18927-8
DBS Bank (Hong Kong)	A/C no. 992-130240625

☐ **Credit Card** ◯ VISA ◯ MasterCard

☐ One-time amount HK$_____ ☐ Every year (until further notice) ☐ Every half year (until further notice)

Credit Card No. ____ — ____ — ____ — ____ Valid until _____

Cardholder's name _____ Cardholder's signature _____

Personal Information Collection Statement

Apart from the above programme, Po Leung Kuk may use your personal data provided in this form and donation record in the database to send you the most updated information relating to our services, development and the appeal of donation campaigns through various channels such as direct mailing, email, telephone, SMS or facsimile, etc. If you do not wish to receive such materials, please put a ✓ in the box below.

☐ I / We do not wish to receive any promotion materials from Po Leung Kuk as specified above.

I / We have read, understood and agree the Personal Information Collection Statement from Po Leung Kuk on the collection, use and transfer of my personal data.

Signature _____ Date _____

Notes

* Please complete this form and send it together with a crossed cheque (made payable to "Po Leung Kuk") or original copy of the pay-in slip to: Finance Department, Po Leung Kuk, 66 Leighton Road, Hong Kong.
* Receipt will be issued to any donation of HK$100 or above.
* For donations through credit card, in case of termination, please write to Finance Department, Po Leung Kuk, 66 Leighton Road, Hong Kong or call 2277 8217.
* If you would like to pay the sponsorship fee through payment by the phone services (PPS), please open an account at any PPS terminal after receiving your sponsorship number assigned by the kuk. The merchant code of Po Leung Kuk is 9136. For enquiries, please call PPS hotline: 900 00 222 329.
* ☐ Please put a ✓ in the box if you would like to use Bank Autopay. An Autopay form will be issued accordingly.

Approved Code

For Official Use Only

poleungkuk1878 保良局