

捐款人資料 (請以正楷填寫) Donor Information (Please complete the form in BLOCK letters)

姓名 Name (先生 Mr / 女士 Ms) _____

團體 / 公司名稱 Organisation / Company Name _____

地址 Address _____

聯絡電話 Contact No. _____ 電郵 Email _____

如何認識 LEAP? How do you know about LEAP?

- 網站 Website 社交媒體 Social Media 電郵 Email 單張 Leaflet 機構活動 Events
- 親友推介 Referral 服務使用者 Service Users 其他 Others

每月捐款 Monthly Donation

我願意作出每月捐款，以支持 LEAP 健康生活及預防教育課程。
I would like to make a monthly donation to support LEAP's health-based preventive education programmes.

每月捐款 Monthly donation of **HK\$50** 一年為**6名**學童提供LEAP流動課室預防教育課程
Sponsor **6 students** to attend preventive education on LEAP Van annually

每月捐款 Monthly donation of **HK\$100** 一年為**12名**學童提供LEAP流動課室預防教育課程
Sponsor **12 students** to attend preventive education on LEAP Van annually

每月捐款 Monthly donation of **HK\$200** 一年為**24名**學童提供LEAP流動課室預防教育課程
Sponsor **24 students** to attend preventive education on LEAP Van annually

其他 Others HK\$ _____

信用卡轉帳授權書 Credit Card Authorisation

VISA MasterCard

持卡人簽署 Cardholder's Signature

持卡人姓名 Cardholder's Name _____

信用卡號碼 Credit Card No. _____

到期日 Expiry Date (月 Month / 年 Year) _____

(備註：最少兩個月有效期。 Remark: Expiry date is valid for at least 2 months.)

簽名必須與閣下之信用卡簽名相同，**表格上如有任何塗改，請在旁簽署。**

Please ensure that the signature used is the same as that on your credit card, and **sign all amendments in the same way.**

聲明 Declaration

本人同意此授權書於本人之信用卡有效期後及獲續發新卡後仍繼續生效，並毋須另行填寫授權書。

I agree that this authorisation survives the expiry of my credit card and any renewal or replacement thereof, with no further authorisation form required.

捐款港幣100元或以上，可憑收據申請退稅。

Donation of HK\$100 or above is tax deductible with official donation receipt.

為幫助節省行政開支，本人 / 機構無需收據。
To help save administrative cost, I/we do not need a donation receipt.

需要捐款收據，收據抬頭
Receipt required, name on receipt _____

我已閱讀並清楚明白及同意以下有關「個人資料收集聲明」的內容，包括：本會持有的個人資料是以個人為基礎收集的或者當您為進行捐贈目的而自願披露的個人資料；所提供之個人資料只作發出捐款收據、會員服務及通訊、募捐、並邀請您出席本會活動等用途；本會只在獲得您同意的前提下，向本會在香港或境外的服務供應商轉交及披露您的個人資料；您有權隨時查閱及更正有關您的個人資料，可發電郵 donation@leap.org.hk 或以書面形式提交本會。

I have read, understood and agreed the below Personal Information Collection Statement, and agree the relevant content, including: personal data you knowingly choose to disclose is collected on an individual basis or for purposes of making donations; your Personal Information will only be used for handling your donation, issuing receipts, providing donor services, communication, appeal fundraising and inviting you to our events etc. LEAP will not provide your Personal Data to our service providers (within or outside Hong Kong) for direct marketing or other unrelated purposes without your consent; you may at any time request access to and update your Personal Data. Any request to access to or update the Personal Data shall be in writing/ by email (donation@leap.org.hk) addressing Life Education Activity Programme.

請將填妥的表格，連同支票、銀行入數紙或其他匯款證明一併寄回本會。

新界葵涌麗瑤邨樂瑤樓地下107 - 113 室或傳真至 2524 8878 / 電郵至 donation@leap.org.hk

如有任何查詢，歡迎致電 2530 0018。

Please complete this form and return with cheque / bank-in slip / transaction record to us.

107-113, G/F, Lok Yiu House, Lai Yiu Estate, Kwai Chung, New Territories, HK / by fax 2524 8878 / by email to donation@leap.org.hk

Please call 2530 0018 for any enquiries.