

# 「培幼之友」捐款表格 “Plan with Children” Donation Form

## 每月捐款 MONTHLY DONATION

- HK\$60  HK\$120  HK\$200  HK\$300  HK\$500  
 其他 Other (必須多於 more than HK\$60) HK\$ \_\_\_\_\_

## 一次性捐款 ONE-OFF DONATION (不適用於自動轉賬 Direct Debit Not Applicable)

- HK\$300  HK\$500  HK\$1,000  其他 Other HK\$ \_\_\_\_\_

## 捐助者資料 DONOR INFORMATION (請以英文正楷填寫 Please write in BLOCK letters)

英文姓名 Name in English : _____ 先生Mr / 太太Mrs / 女士Ms / 小姐Miss	
出生年份及月份 Year and Month of Birth: _____	捐助者號碼(如適用) Donor ID (if applicable) : _____
手提電話 Mobile No. : _____	電郵 Email : _____
地址 Address : _____	
我希望用以下方式收取年度收據(捐款港幣一佰元或以上可扣減稅項) I would like to receive my official annual receipt via (donations of HK\$100 or above are tax deductible) <input type="checkbox"/> 電郵 Email <input type="checkbox"/> 郵寄 Postal mail <input type="checkbox"/> 我不需要年度收據 I do not want to receive the official receipt	
收據抬頭 Name on receipt (請以英文正楷填寫 Please write in BLOCK letters)	

## 捐款方法 DONATION METHOD (恕不接受現金捐款 Cash donation is not accepted)

<input type="checkbox"/> 本地信用卡 Local Credit Card <input type="checkbox"/> VISA <input type="checkbox"/> Master Card
<input type="checkbox"/> 海外信用卡 Overseas Credit Card
信用卡號碼 Credit Card No. : _____
持卡人姓名 Cardholder's Name : _____
有效日期 Card Expiry Date : _____ (月MM / 年YY) (三個月內有效 3 months validity)
持卡人簽署 Cardholder's Signature : _____

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時繼續生效，並毋需另行填寫授權書。  
I agree the validity of this agreement will continue before or after the expiry date of my credit card account.  
信用卡每月的15號過數。Credit card transactions will normally be processed on or around the 15th of the month.

**\*如欲更改每月捐款安排，請於每月過帳前七個工作天致電或電郵至國際培幼會(香港)查詢。  
To change any arrangements of your monthly donations, please contact Plan International Hong Kong via telephone/email 7 working days before the transaction date each month.**

- 銀行自動轉賬 Bank Autopay** (只適用於每月捐款。For monthly donation only.)  
請填妥右頁之自動轉賬授權書。Please fill the Direct Debit Authorisation Form on the right.
- 銀行轉賬 Bank Transfer** (只適用於一次性捐款。For one-off donation only.)  
請將捐款直接存入匯豐銀行戶口號碼 640-068318-838，並將銀行入數紙正本連同此表格寄回。  
Please make a direct deposit into HSBC account number 640-068318-838 and send us the original bank receipt with this form.
- 劃線支票 Crossed Cheque** (只適用於一次性捐款。For one-off donation only.)  
支票抬頭請寫上「國際培幼會有限公司」，並連同此表格寄回。  
Please send us a crossed cheque made payable to "Plan International Hong Kong Ltd" with this form.
- 現金捐款：OK或VanGO便利店或U購Select超級市場 Cash Donation Via Circle K or VanGO or U Select** (只適用於一次性捐款。For one-off donation only.)  
請攜同捐款條碼，到全港任何一間OK或VanGO便利店或U購Select超級市場以現金捐款，並將捐款收據連同此表格寄回。  
Please bring along the barcode to any Circle K or VanGO stores in Hong Kong to make a cash donation and send us the original receipt with this form.  
\* 每筆捐款上限為港幣5,000元 Upper limit per transaction is HK\$5,000



網上捐款 [www.plan.org.hk](http://www.plan.org.hk)  
Donate Online

## 捐款者選擇 DONOR PREFERENCE

我選擇的通訊語言是My preferred language for communication is :  英文 English  中文 Chinese

通訊方式選擇 Preference of communication  
Email  郵寄 Postal mail  兩者皆可 No Preference

培幼會會刊、活動邀請及捐款呼籲  
Newsletters, programmes & donation invitations from Plan

## 自動轉賬授權書 DIRECT DEBIT AUTHORISATION FORM

收款一方之名稱(收款人) Name of party to be credited (The Beneficiary) : <b>國際培幼會有限公司 Plan International Hong Kong Limited</b>		
銀行編號 Bank No. <b>004</b>	分行編號 Branch No. <b>640</b>	收款賬戶之號碼 Account No. to be credited <b>068318838</b>
銀行及分行名稱 Bank and Branch name		
銀行編號 Bank No.	分行編號 Branch No.	本人(等)之儲蓄/往來戶口號碼 Savings/Current Account No.
本人(等)之銀行戶口姓名 My/Our full name(s) with my/our Bank <b>先生Mr / 女士Ms / 小姐Miss</b>		
本人(等)之地址 My / Our full address		
大廈 Bldg. / Mansion/House	屋苑 / 街巷 Court / Estate / Street / Road	地區 District <b>香港HK / 九龍KLN / 新界NT</b>
每次 / 月最高付款限額 Maximum Limit for Each Payment / Month	填表日期 Date of Completing Form	

注意: 如無填寫, 付款銀行會將轉賬限額定為“不設上限”。  
Note: If blank, the debtor's bank will set as "unlimited".

銀行戶口之簽名 Signature of Bank Account Holder	戶口持有者之身份證號碼 ID No. of Account Holder
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## 此欄不用填寫 For Official Use Only

捐款人編號 Debtor's reference	由銀行填寫 For Bank Use	簽名式樣 Signature Verified
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請交回表格正本，任何塗改請簽名以示確認。  
Only originals are accepted, any alteration requires signature.

- 本人(等)現授權本人(等)的上述銀行，(根據收款人或其往來銀行及/或代理行不時給予本人(等)銀行的指示)自本人(等)的戶口內轉賬予上述收款人，惟每次轉賬金額不得超過以上指定的限額。
- 本人(等)同意本人(等)的銀行毋須證實該等轉賬通知是否已交予本人(等)。
- 如因該等轉賬而令本人(等)的戶口出現透支(或令現時的透支增加)，本人(等)願共同及個別承擔全部責任。
- 本人(等)同意如本人(等)的戶口並無足夠款項支付該等轉賬，本人(等)的銀行有權不予轉賬，且銀行可收取慣常的收費，並可隨時以一星期書面通知取消本授權書。
- 本直接付款授權書將繼續生效直至另行通知為止或直至上列日期為止(以兩者中最早的日期為準)。本人(等)同意如本人(等)已設立之直接付款授權的戶口連續三十個月內未有根據本授權書而作出過賬的紀錄，本人(等)的銀行保留權利取消本直接付款安排而毋須另行通知本人(等)，即使本授權書未到期或未有註明授權到期日。
- 本人(等)同意，本人(等)取消或更改本授權書的任何通知，須於取消/更改生效日期最少兩個工作天之前交予本人(等)的銀行。  
附註: 1. 本人(等)確認本人(等)在此表格的簽署與本人(等)用以轉賬的戶口的簽署相同。2. 捐款約每月9號過數。
- I/We hereby authorize my/our above named Bank to effect transfers from my/our account to that of the above named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated above.
- I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer or reversal notice has been given to me/us. 3. We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfers.
- I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, 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 authorization at any time on one week's written notice.
- This direct debit authorization shall have effect until further notice or until the expiry date written above (whichever shall first occur). I/We agree that if no transaction is performed on my/our account under such authorization for a continuous period of 30 months, my/our Bank reserves the right to cancel the direct debit arrangement without prior notice to me/us, even though the authorization has not expired or there is no expiry date for the authorization.
- I/We agree that any notice of cancellation or variation of this authorization 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/variation is to take effect.

請將填妥表格郵寄或電郵至國際培幼會(香港)。  
Please mail or email the completed form to Plan International Hong Kong.

## 捐助者須知 NOTES TO DONORS

凡提交此表格，即表示您已閱讀及明白《個人資料收集聲明》，並同意聲明內有關國際培幼會有限公司收集及使用您個人資料的用途。  
By submitting this form, you signify that you have read and understood the Personal Information Collection Statement, and you agree to the collection and use of your personal data for the purposes mentioned in the Statement by Plan International Hong Kong Ltd.

如您不同意將您的個人資料用作聲明內有關直接營銷的用途及收取有關資料，請在表格上加註聲明。  
If you do not agree to the use of your personal data for direct marketing purposes as mentioned in the Statement and receive any related materials, please tick the box.

「私隱政策」: [www.plan.org.hk/zh/私隱政策](http://www.plan.org.hk/zh/私隱政策)  
Privacy Policy Statement: [www.plan.org.hk/en/privacy](http://www.plan.org.hk/en/privacy)

凡提交此表格，即表示您已得悉及同意國際培幼會的「全球守護政策」。  
By submitting this form, you signify that you have read and understood the Global Safeguarding Policy and agreed to be bound by Plan International's "Global Safeguarding Policy".  
Global Safeguarding Policy: <https://www.plan.org.hk/en/our-global-safeguarding-policy/>

如有任何疑問，請與本會捐款者服務部聯絡。  
If you have any queries, please contact our Supporter Services Department.  
Tel 電話: +852 3405 5305  
E-mail 電郵: [supporter@plan.org.hk](mailto:supporter@plan.org.hk)