



捐款者資料 Donor's Information

善長 / 機構芳名(中文)： _____(先生 / 女士 / 小姐)

Name / Organization (English)： Mr / Mrs / Miss _____

聯絡地址 Address： _____

聯絡電話(Tel)： _____ 傳真號碼(Fax)： _____ 電郵地址(Email)： _____

捐款項目 Donation Item

本人願意捐款如下，以支持齋色園各項服務 I would like to make a donation for Sik Sik Yuen as follows :

請選擇以下捐款項目 Please Choose Donation Item(s) :

1. 齋色園慈善捐款(醫療/社福/教育/其他慈善服務) Sik Sik Yuen Charities Donation
2. 香油捐獻 Temple & Religious Donation
3. 黃允畋慈善基金(醫療) Wong Wan Tin Benevolence Fund (Medical Purpose)
4. 齋色園緊急援助基金 Sik Sik Yuen Emergency Fund

捐款金額 Monthly Donation Amount

HK\$1,000 HK\$500 HK\$300 HK\$100 _____ 其他金額 Other Donation Amount

捐款方法 Donation Method

A. 每月捐款 Monthly Donation

A1. 信用卡每月捐款 Monthly Donation by Credit card

<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD		發卡銀行 Issuing Bank	
信用卡號碼 Card No.	- - -	有效日期至*Expiry Date*	月 Month 年 Year
持卡人姓名 Cardholder's Name		持卡人簽名 Cardholder's Signature	X

* 本人授權齋色園會由本人之信用卡戶口轉賬上述指定金額作定期捐款。此授權在本人之信用卡有效期過後及獲發新卡後仍繼續生效，直至另行通知。
The authorization for the Sik Sik Yuen to debit the specified amount monthly from his/ her credit card account will continue after the expiry date of the credit card and with the issuance of a new card until further notice.

A2. 銀行戶口自動轉帳 Bank Monthly Auto-pay (只接受正本 Only original is accepted)

請向本園索取「直接付款授權書」，並將填妥之捐款表格連同授權書交回齋色園總辦事處。

Please ask for the "Direct Debit Authorization", completed the authorization and return to Sik Sik Yuen with completed donation form.

B. 一次性捐款 One-off Donation

B1. 劃線支票 Crossed Cheque

支票抬頭：「**齋色園**」 Payable to “**SIK SIK YUEN**”

銀行名稱 Bank：_____ 支票號碼 Cheque no.：_____

B2. 銀行存款記錄單 Deposit Slip

恒生銀行賬戶號碼：293-1-328328 Hang Seng Bank Account No: 293-1-328328

捐款收據 **Donation Receipt**

需要 Please issue donation receipt

捐款收據芳名 Name on receipt：_____ 先生 Mr/女士 Ms/小姐 Miss/太太 Mrs

每月捐款正式收據將於每年五月寄奉，以便您填寫報稅表。For monthly donation, an annual receipt will be issued in May to help you pursue your tax return.

為節省行政開支，我不需要捐款收據。To save administration costs, no donation receipt is required.

備註 **Remarks**

- 請填妥本捐款表格，透過郵寄(自動轉帳方法必須郵寄)、傳真或電郵擲回本園，本園將有專人跟進。
Please return the completed donation form by post, fax or e-mail, our designate personnel will follow up.
 - Postal Address : Sik Sik Yuen, 2 Chuk Yuen Village, Wong Tai Sin, Kowloon
郵寄地址 : 九龍黃大仙竹園村二號齋色園總辦事處
 - Fax No : (852) 2351 5640
傳真號碼 : (852) 2351 5640
 - E-mail Address : info@siksikyuen.org.hk
電郵地址 : info@siksikyuen.org.hk
- 本園為政府認可獲豁免繳稅的慈善團體，捐款人捐款港幣 100 元或以上可憑正式收據向政府申請減免稅款。
Sik Sik Yuen is an approved tax-exempt charitable organization. Donors with donation of HK\$100 or above can apply for tax deduction with official receipt.
- 請在 加上 “✓” 號。 Please put “✓” in the appropriate .
- 表格上如有任何塗改，請在旁簽署。
Please sign against any alterations you make on this form
- 齋色園所收集之個人資料只供本園作上述捐款指示跟進、發出收據、通訊、籌款及收集意見之用。所有資料絕對保密，及只會向讓須處理此申請之銀行/信用卡公司透露。如有任何問題，可致電(852) 2327 8141 與本園聯絡。
Personal data collected will only be used by SIK SIK YUEN, for follow up the donation instruction, issuing receipts, fostering communications, raising funds and conducting donor survey. All information collected will be kept strictly confidential and will only disclose to those Bank/Credit Card issuer who require to handle the said application. Should you have any enquiries, please call (852) 2327 8141.

齋色園專用 For Sik Sik Yuen Internal Use

收表日期		表格編號		銀行處理日期	
收表經手人		收據編號(如適用)		完成日期	

直接付款授權書 DIRECT DEBIT AUTHORISATION

請把捐款表格之正本郵寄回本園。表格上如有任何塗改，請在旁簽署。

Please mail the **original** donation form to us. Please sign against any alterations you make on this form

收款人之一方 (受益人) Name of the Party to be credited (The beneficiary)	銀行編號 Bank No.	分行編號 Branch No	賬戶號碼 Account No.
Sik Sik Yuen	024	385	308838-001
本人/吾等之銀行及分行名稱 My/Our Bank Name and Branch	銀行編號 Bank No.	分行編號 Branch No	本人/吾等之往來/儲蓄賬戶號碼 My/Our Current/Savings Account No.

本人/吾等在結單/存摺上所紀錄之名稱 My/Our Name(s) as recorded on Statement/Passbook

(中文)

(English)

本人/吾等在結單/存摺上所紀錄之地址 My/Our Address as recorded on Statement/Passbook	聯絡電話 Contact Tel
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每次付款之限額 Limit for each payment	到期日 Expiry Date	本人/吾等之銀行戶口簽署 My/Our Signature(s) ** 必須與銀行賬戶所簽署者完全相同 same signature of your bank account holder(s)	日期 Date
HK \$	如無填寫，此直接付款授權書將無限期有效直到另行通知 If blank, this authorization shall have effect unit further notice.	X	

本園專用 For Official Use Only		銀行專用 For Bank Use Only	
Remarks	支賬參考 Debtor's Reference	Remarks	Authorized Signature with Branch Chop

- 本人/吾等現授權本人/吾等之上述銀行，(根據受益人及/或代理行不時給予本人/吾等銀行之指示)自本人/吾等之賬戶內轉賬至上述受益人。I/We hereby authorise my/our below named Bank to effect transfers from my/our account to the above beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary from time to time
- 本人/吾等同意本人/吾等之銀行毋須證實該等轉賬通知是否已交予本人/吾等。I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.
- 如因該等轉賬而令本人/吾等之賬戶出現透支(或令現時之透支增加)，本人/吾等願共同及個別承擔全部責任。I/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 transfer(s).
- 本人/吾等同意如本人/吾等之上述戶口並沒有足夠款項支付任何授權之轉賬時，該銀行有絕對酌情權在(i)未經本人/吾等的批准下；或(ii)在未有預先通知本人/吾等的情況下，執行有關授權轉賬，如因該等轉賬而令本人/吾等之上述戶口出現透支(或令現時之透支增加)，本人/吾等會共同及個別承擔全部責任及同意在此情況下，該銀行可向本人/吾等收取任何利息及費用(該等利息及費用，由該銀行不時釐定)。I/We agree that in the event that there is insufficient funds in my/our above-mentioned account to effect any transfer hereby authorized, the Bank may, in its absolute discretion, effect such transfer without (i) seeking prior approval from me/us; or (ii) providing prior notice to me/us. I/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 transfer(s), in which event I/We agree that the Bank may charge me/us any interest, cost and expense which may arise as a result of any such transfer (where such interest, cost and expense shall be determined by the Bank from time to time).
- 儘管以上第4段所述，本人/吾等同意如本人/吾等之上述戶口並沒有足夠款項支付該等授權轉賬時，該銀行有絕對酌情權不予執行有關授權轉賬，且該銀行可向本人/吾等收取由該銀行不時釐定之費用。本人/吾等亦同意，如因本人/吾等之上述戶口並沒有足夠款項支付該等授權轉賬而導致的轉賬取消或延誤所引起之一切費用或責任，概由本人/吾等自負，與該銀行無涉。Notwithstanding paragraph 4 above, I/We also agree that in the event of insufficient funds in my/our above-mentioned account to effect any payment hereby authorized, the Bank shall be entitled, in its absolute discretion, not to effect such payment in which event the Bank may charge me/us any fees and charges prescribed by the Bank from time to time. I/We also agree that I/We shall be solely responsible for any surcharge or consequences for any delay or failure in making payment which may arise as a result of any such payment not effected due to insufficient funds, and the Bank shall have no liability in connection therewith.
- 本授權書將繼續生效直至另行通知為止或直至上列到期日為止(以兩者中最早之日期為準)。This authorisation shall have effect until further notice or until the expiry date written above (whichever shall first occur).
- 本人/吾等同意，本人/吾等取消或更改本授權書之任何通知，須於取消/更改生效日最少兩個工作天之前交予本人/吾等之銀行。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.
- 本人(等) 確證在本授權書內之簽名，與本人(等)上述戶口於該銀行簽署紀錄完全相同。I/We confirm that my/our signature(s) on this authorization is/are the same as filed with the Bank for the operation of my/our above-mentioned account to be debited for the transfer.