

每月捐款表格 Monthly Donation Form



捐款者資料 Donor's Information

公司 / 團體 / 個人名稱
Company / Organization / Name _____

聯絡人
Contact Person _____ 先生 / 女士 / 小姐 職位
Mr. / Ms. / Miss. Title _____

地址
Address _____

電話
Tel. _____ 傳真
Fax _____

電郵
Email _____ 日期
Date _____

如收據抬頭與上述公司/個人名稱不同，請註明：
If the name of the receipt is different from the company/personal name, please state: _____

- 捐款港幣\$100或以上可申請扣稅。Donations of HK\$100 or above are tax deductible

捐款金額 Donation Amount

(請在適當方格內加上 ✓ 號 Please tick where appropriate)

- 我願意成為每月捐款者
I am willing to be a donor for monthly donation program
- HK\$1,000 HK\$500 HK\$300 HK\$200 HK\$100 其他金額 Other amount HK\$ _____
- 為節省行政開支，我不需要年度捐款收據。To save administration costs, no annual donation receipt is required.

捐款方法 Donation Method

- 信用卡 Credit Card
(信用卡捐款者可郵寄或傳真此表格至2947 8780。For credit card donation, please send this form to us by mail or by fax to 2947 8780.)
- VISA Master Card AE
- 信用卡號碼
Credit Card No. _____ 有效日期至
Expiry Date _____
- 持卡人姓名
Cardholder's name _____ 持卡人簽署
Cardholder's signature _____

備註：本人授權麥當勞叔叔之家慈善基金由本人之信用卡戶口轉賬上述指定金額作為定期捐款，此授權在本人之信用卡有效期過後及獲發新信用卡後仍繼續生效，直至另行通知。
Notes: The authorization for the Ronald McDonald House Charities 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.

- 自動轉賬(直接)付款授權書 Autopay (Direct Debit) Authorization
請把**正本**表格郵寄回麥當勞叔叔之家慈善基金，以設立銀行自動轉賬服務。Please mail the **original** form to Ronald McDonald House Charities for auto-pay set up.

表格上如有任何塗改，請在旁簽署。Please sign against any alterations you make on this form.

收款的一方 (收款人) Name of Party to be Credited (The Beneficiary)	銀行號碼 Bank No.	分行號碼 Branch No.	戶口號碼 Account No.
麥當勞叔叔之家慈善基金有限公司 Ronald McDonald House Charities Hong Kong Limited	0 0 3	4 4 7	1 0 6 0 6 1 9 5
本人(吾等)的銀行及分行的名稱 My/Our Bank Name and Branch	銀行號碼 Bank No.	分行號碼 Branch No.	本人(吾等)的戶口號碼 My/Our Account No.
本人(吾等)在結單/存摺上所紀錄的名稱 My/Our Name(s) as recorded on Statement/Passbook	聯絡電話號碼 Contact Telephone No.		
本人(吾等)在結單/存摺上所紀錄的地址 My/Our Address as recorded on Statement/Passbook	每次捐款限額 Limit for Each Donation		
本人(吾等)之簽名及公司蓋印 My/Our Signature(s) and Company Chop <small>必須與銀行賬戶簽署完全相同 same signature of your bank account holder(s).</small>	日期 Date		
X			

此欄由本基金職員填寫 For official use only

慈善基金付款人(捐款人)編號 RMHC Debtor (Donor) Ref. No.	銀行專用 For Bank Use Only	Branch Chop	Remarks
--	------------------------	-------------	---------

- I/We hereby authorize my/our below named Bank of 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. 本人(等)現授權本人(等)的下列銀行，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。
- 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. 本人(等)同意本人(等)的銀行無須證實該等轉賬通知是否已交予本人(等)。
- 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). 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。
- I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorised, 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. 本人(等)同意如本人(等)戶口並無足夠款項支付該等授權轉賬，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。
- This direct debit authorization shall have effect until further notice or until the expiry date written below (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. 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到期日為止(以兩者中最早的日期為準)。本人(等)同意如本人(等)已設立的直接付款授權的戶口連續三十個月內未有根據本授權而作出過賬的紀錄，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)，即使本授權書並未到期或未有註明授權到期日。
- 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)同意，本人(等)取消或更改本授權書的任何通知，須於取消或更改生效日最少兩個工作天前交予本人(等)的銀行。

注意事項：所收集的個人資料將保密處理，作為寄發收據及通訊之用。如不欲收取本機構資訊/需查詢/更改個人資料，請與我們聯絡。電話：2947 8778 傳真：2947 8780 電郵：rmh@rmhc.org.hk

Notes: The personal data collected will be treated as strictly confidential and will be used only for receipting and other communications with you. If you do not wish to receive any mailings from us, or if you want to have access to or change your personal data, please contact us. Tel: 2947 8778 Fax: 2947 8780 Email: rmh@rmhc.org.hk