

請於適當的□內加 X。 Please complete in block letters and put “X” in the appropriate box.

捐款資料 Donation Information

本人 / 機構願意每月捐款 HK\$_____支持青年全球網絡以下項目 (可選擇多項):	
I / My organisation would like to make a monthly donation to the following project(s) of the Youth Global Network (may choose more than one):	
<input type="checkbox"/> 數碼成長創路計劃 Project C-Creative, Coding for Change	<input type="checkbox"/> 咖啡及生命事工 Coffee & Life Ministry
<input type="checkbox"/> 青年全球發展基金 Endowment for Youth Global Development	<input type="checkbox"/> 錦田項目 Kam Tin Project
<input type="checkbox"/> 蔡廖水玉助學基金 Ellen Choi Scholarship Fund	<input type="checkbox"/> 常務經費 General Offering
<input type="checkbox"/> 蔡曾以琴慈善基金 Choi Chin Yi Kum Charity Foundation	<input type="checkbox"/> 支持同工薪酬 Support Staff Salary for (姓名 Name):

捐款者 / 機構資料 Personal / Organisation Particulars

捐款人姓名 / 機構名稱 Name of Donor (Person / Organisation):	
中文 Chinese:	英文 English :
機構聯絡人姓名(如適用) Name of contact of the organisation (if applicable):	
中文 Chinese:	英文 English:
稱謂 / Title: <input type="checkbox"/> 先生 Mr. <input type="checkbox"/> 女士 Ms. <input type="checkbox"/> 其他 (請註明) Other (please specify):	
通訊地址 Correspondence address:	
電話 Tel. no.:	電郵 e-mail:

捐款方法 Donation Methods

☐ 銀行戶口每月自動轉賬授權書. Direct Debit Authorisation

收款之一方(受惠機構) Name of party to be credited (The Beneficiary)															
Youth Global Network Limited															
銀行編號 Bank no.				分行編號 Branch no.				收款賬戶之號碼 Account no. to be credited							
0	1	5		1	5	7	6	8	0	0	4	5	4	5	
銀行編號 Bank no.				分行編號 Branch no.				本人(等)之賬戶之號碼 Savings/Current Account No							
本人(等)在結單 / 存摺上所紀錄之賬戶英文名稱 My/our full A/C English name(s) as recorded on Statement / Passbook															
聯絡電話 Contact tel. no.															
每月港幣捐款總額 HK\$ Monthly amount															
本人(等)之簽名(銀行戶口簽名) My/Our Signature(s) as Used for My/Our Bank Account															
以下不必填寫 For Official Use Only															
本會債務人參考 Donor Reference								供銀行專用 For Bank Use				簽名式樣核對 Signature Verified			

本人(等)現授權本人(等)之上述銀行，根據受惠機構不時給予本人(等)銀行之指示，自本人(等)之賬戶內轉賬予上列之受惠機構。但每次轉賬金額不得超過以上指定之限額。
本人(等)同意本人(等)之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)之賬戶出現透支(或令現時之透支增加)，本人(等)會共同及各別承擔全部責任。
本人(等)確證在本授權書內的簽名與本人(等)用以轉賬的戶口的簽署相同。
本人(等)同意如本人(等)之賬戶並無足夠款項支付該等授權轉賬，本人(等)之銀行有權不予轉賬，且銀行可收取慣常之收費，該等費用一概由本人(等)支付。
本人(等)同意取消或更改本授權書之任何通知，須於取消或更改生效日最少兩個工作天之前交予本人(等)之銀行。
本直接付款授權書將繼續生效直至另行通知為止。
I/We hereby authorise my/our left named Bank to effect transfers from my/our account to the account indicated on the left 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 on the left.
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.
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).
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 authorisation at any time on one week’s written notice.
This authorisation shall have effect until further notice or until the expiry date written on the left (whichever shall first occur).
I/We agree that any notice of cancellation or variation of this authorisation 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.

☐ 信用卡 (適用於每月定期捐款) Credit card (For monthly donation):

持卡人姓名 Cardholder’s name:	
信用卡 Credit card:	<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD
信用卡號碼 Credit card no.:	
有效期至 Expire day:	__/__/__ (月month/年year)
持卡人簽署 Signature * :	
驗證碼 Security code (CVV):	
*簽署必須與上述信用卡戶口簽名式樣相同 Signature should correspond to specimen signature of above specified credit card account	

信用卡付款授權書 Credit card payment authorisation:

本人現授權銀行於本人信用卡賬戶內支付港幣_____元作為青年全球網絡有限公司的每月捐款，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。

I hereby authorise my bank to debit my credit card account to make a monthly donation of HK\$_____ to **Youth Global Network Limited** continuously after the expiry date of the credit card and with the issuance of a new credit card until further notice.

備註 Remarks:

- 捐款港幣 100 元或以上可取得免稅收據。
- 每月定額捐款之捐款證明將於每年 4 月發出。
- 銀行自動轉賬授權書必需郵寄正本給本機構。
- A tax deductible receipt will be issued for donations of HKD100 or above.
- Donation summary of regular monthly donation would be issued in April of each year.
- Please return the original Direct Debit Authorisation Form to Youth Global Network.

個人資料收集 Personal Information Collection Statement

閣下所提供的資料將用於發展會務、日後聯絡及通訊之用，除獲本會授權的人員外，將不會提供予其他人士。我們在未得到你的同意之前不能如此使用你的個人資料。根據個人資料(私隱)條例，閣下有權向本機構查詢及更改你的個人資料。有意者請以電郵 enquiry@ygn.org.hk 聯絡我們。
The information provided by you will be used for administration purposes and we may also keep you informed of our activities. Apart from personnel authorised by the organisation, no one will be given access to your personal information. We cannot use your personal data without your consent. Request for personal data access and correction should be addressed to us by e-mail at enquiry@ygn.org.hk.
請在以下空格加上「X」號，然後簽署，以表達閣下的意向。
Please put “x” in the box below and sign it to indicate your preference.
☐ 本人不同意「青年全球網絡」使用本人之個人資料作上述用途。
I disagree to the proposed use of my personal data for the above-mentioned purposes.

Date: