



浸信會呂明才中學

Baptist Lui Ming Choi Secondary School

## 同心牆捐款表格

Co-star Wall Donation Form

明道致知

### 捐款人資料 Donor Particulars

姓名 (先生/太太/女士) \_\_\_\_\_ (中文)

Name (Mr./Mrs./Ms.) \_\_\_\_\_ (English)

機構/職位 Company/Title \_\_\_\_\_

聯絡地址 Corresponding Address \_\_\_\_\_

住宅電話 Home Tel \_\_\_\_\_

辦事處電話 Office Tel \_\_\_\_\_

手提電話 Mobile \_\_\_\_\_

電郵 Email \_\_\_\_\_

收據抬頭 (如非用上列名字) Name on Receipt (if different from the above) \_\_\_\_\_ (English)

與學校關係 Affiliation with BLMCCS

現任家長 Current Parent

學生姓名 Student Name \_\_\_\_\_

班別 Class \_\_\_\_\_ ( )

校友 Alumnus

級社 Form Association \_\_\_\_\_

其他(請註明) \_\_\_\_\_

Others (Please specify) \_\_\_\_\_

收集個人資料聲明 Personal Information Collection Statement (請在方格加上'√'以表示同意 Please '√' if you agree)

本人同意及提供本表格內之資料作浸信會呂明才中學籌款及其他相關活動用途。倘未得本人同意，學校絕不會向外披露任何個人資料。本人亦有權要求查閱、改正及刪除有關的個人資料。(如欲行使這項權利，請與本校聯絡。) The information collected in this form will be used for the purposes of donation and other related activities in the school. No personal data shall be disclosed to other organizations or individuals without my prior consent. I have the right to request access to, deletion and correction of information about myself held by the school. (Please contact us for any such request.)

### 捐贈金額 Donation Amount

本人願意捐款 I would like to make a **donation** of

HK\$30,000       HK\$20,000       HK\$10,000  
鑽 Diamond      金 Gold      銀 Silver

及本人欲將以下文字刻印石塊表面 and I would like to have the following wordings engraved on rock

擬定之文字須經校方審議，文字長度：中文 - 不多於 15 字 英文 - 不多於 30 字元

(如未有標明，即刻印捐款人名字)

本人願意捐款 HK\$5,000 銅 (石塊表面將刻印捐款人名字)

I would like to make a **donation** of HK\$5,000 Bronze (donor's name will be engraved on rock)

予浸信會呂明才中學 for Baptist Lui Ming Choi Secondary School

正式收據將郵寄至 閣下之郵寄地址。 Official receipt will be sent to your mailing address in due course.

### 捐贈方法 Donation Methods

劃線支票 by crossed cheque (抬頭請註明「浸信會呂明才中學法團校董會」 Payable to 'The Incorporated Management Committee of Baptist Lui Ming Choi Secondary School')

支票號碼 Cheque number \_\_\_\_\_ 銀行名稱 Bank \_\_\_\_\_

信用咭 by credit card (信用咭公司會收取約 3% 費用 3% of the donation will be charged by the credit card Co.)

Visa Card       Master Card

持卡人姓名 Cardholder's Name \_\_\_\_\_

信用咭號碼 Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

屆滿日期 Expiry Date \_\_\_\_\_ (月 Month) \_\_\_\_\_ (年 Year)

持咭人簽名 Cardholder's Signature \_\_\_\_\_

如有任何查詢，歡迎聯絡我們。 For enquiries, please contact us:

電話 Phone No. : 26922161

地址 Address : 香港新界沙田源禾路十一號 浸信會呂明才中學

傳真 Fax No. : 26915406

Baptist Lui Ming Choi Secondary School

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