捐款表格 Donation Form

元。

| | 請用正楷填寫 PLEASE USE BLOCK LETTERS | | | | | |
|--------------------------|---------------------------------|-----------|------------|-----------|--|--|
| 個人/機構名稱 | (中文) | (Chinese) | | | | |
| Name/Organization: 地址 | (英文) | (English) | | | | |
| Address: | | | | | | |
| 聯絡人 | 先生/女士/小姐* | | 職銜 | | | |
| Contact Person: | Mr./Mrs./Ms.* | | | Position: | | |
| 聯絡電話 | | | 傳真 | | | |
| Contact Telephone: | | | Facsimile: | | | |
| 電郵地址 | | | | | | |
| E-mail Address: | | | | | | |

請填妥表格連同劃線支票寄回:

本人/機構捐款港幣

I / our organization will make a donation of HK\$

九龍油麻地彌敦道 557-559 號永旺行 12 樓 B 室 支票抬頭:香港傷健共融網絡有限公司

*請刪去不適用者 Please delete as appropriate

或直接存入機構戶口並把存根電郵至機構:

恒生銀行:390-398550-001

轉數快:160807616

查詢請電

電話: 2771 9666 傳真: 2787 0917

電郵: info@inclusive.org.hk 網址: www.inclusive.org.hk Please return the completed form by post with crossed cheque payable to "Hong Kong Network for the Promotion of Inclusive Society Limited" to Flat B, 12/F, Wing Wong Commercial Building, 557-559 Nathan Road, Yau Ma Tei, Kln.

Or transfer the donation to

Hang Seng Bank: 390-398550-001

FPS: 160807616

and send the bank-in slip to us.

Enquiries

Tel: 2771 9666 Facsimile: 2787 0917

E-mail: info@inclusive.org.hk Website: www.inclusive.org.hk