

愛心滿東華 免費醫療服務捐助計劃  
Free Medical Services Donation Scheme

捐助表格

Donation Reply Form

致：東華三院

To：Tung Wah Group of Hospitals

本人/公司樂意支持上述計劃，詳情如下(請在所選項目的空格內加上「✓」；並在註「\*」該處刪去不適用者)：

I am/We are pleased to render support to the above scheme as follows (Please tick the appropriate box(es) and “\*” delete if inappropriate)：

(I) 樂捐善款以出任大會贊助人 As Patron

贊助人類別(捐款額) Patronage (amount)	鳴謝安排 Acknowledgement arrangements				
	同意於東華醫院及東華東院所設的善長金榜上銘誌芳名，最少為期一年 To be acknowledged on the Donors Plaques at Tung Wah Hospital and Tung Wah Eastern Hospital for at least one year	樂意出席2009年9月4日(星期五)假灣仔香港君悅酒店舉行的慈善晚會 To attend the Charity Dinner Show at the Grand Hyatt Hong Kong, Wanchai on Friday, 4/9/2009	樂意於晚會儀式中接受紀念品 To receive a souvenir at the ceremony of the Charity Dinner Show	樂意於場刊內刊登全頁彩色特刊廣告[請填寫(III)項的廣告內容] To print a full-page coloured advertisement in the souvenir programme [Please complete the "Content" of item (III)]	同意於場刊贊助入芳名錄內銘誌是項捐助 To be acknowledged in the souvenir programme
<input type="checkbox"/> 永久榮譽贊助人 (\$500,000或以上) Permanent Honourable Patron(\$500,000 or more)	<input type="checkbox"/> 永久題名 To be inscribed permanently	<input type="checkbox"/> 兩席二十位餐券 Dinner coupons for 2 tables of 20 persons	<input type="checkbox"/> 代表 Representative：	<input type="checkbox"/> 兩頁 2 pages	<input type="checkbox"/>
<input type="checkbox"/> 榮譽贊助人 (\$300,000或以上) Honourable Patron (\$300,000 or more)	<input type="checkbox"/> 題名五年 To be inscribed for 5 years	<input type="checkbox"/> 一席十位餐券 Dinner coupons for a table of 10 persons	<input type="checkbox"/> 代表 Representative：	<input type="checkbox"/> 兩頁 2 pages	<input type="checkbox"/>
<input type="checkbox"/> 鑽石贊助人 (\$100,000或以上) Diamond Patron (\$100,000 or more)	<input type="checkbox"/>	<input type="checkbox"/> 一席十位餐券 Dinner coupons for a table of 10 persons	<input type="checkbox"/> 代表 Representative：	<input type="checkbox"/> 一頁 1 page	<input type="checkbox"/>
<input type="checkbox"/> 金贊助人 (\$68,000或以上) Gold Patron (\$68,000 or more)	<input type="checkbox"/>	<input type="checkbox"/> 一席十位餐券 Dinner coupons for a table of 10 persons	<input type="checkbox"/> 代表 Representative：	<input type="checkbox"/> 一頁 1 page	<input type="checkbox"/>
<input type="checkbox"/> 銀贊助人 (\$38,000或以上) Silver Patron (\$38,000 or more)	<input type="checkbox"/>	<input type="checkbox"/> 一席十位餐券 Dinner coupons for a table of 10 persons	<input type="checkbox"/> 代表 Representative：	<input type="checkbox"/> 一頁 1 page	<input type="checkbox"/>

以上捐助用以支持：☐ 免費門診服務 ☐ 免費病床服務 ☐ 免費醫療服務(由東華三院因應情況調撥於較急需的免費醫療項目上)

The above donation is made for：☐ free outpatient services ☐ free bed services ☐ free medical services (on more urgent free medical services items to be decided by the Tung Wah Group of Hospitals)

(II) 訂購慈善晚會餐席 Subscription for dinner coupons for the Charity Dinner Show

捐款額(每席\$28,000) Amount (\$28,000 for a table)	餐席及鳴謝安排 Table & acknowledgement arrangements
\$ _____	<input checked="" type="checkbox"/> 請發給於2009年9月4日(星期五)假灣仔香港君悅酒店舉行的慈善晚會_____席(一席十位)餐券 Please provide dinner coupons for _____ table(s) (a table of 10 persons) for the Charity Dinner Show at the Grand Hyatt Hong Kong, Wanchai on Friday, 4/9/2009 <input type="checkbox"/> 同意於場刊內刊登是項捐助 To be acknowledged in the souvenir programme

(III) 刊登彩色特刊廣告 Donation for advertisement in the souvenir programme

捐款額 Amount	版位 Size	廣告內容 Content
<input type="checkbox"/> \$10,000	全頁 Full page [26 cm (L) x 18 cm (W)]	<input type="checkbox"/> 請刊登附上的廣告稿(ai或jpg格式) An advertisement file (in ai or jpg format) is attached
<input type="checkbox"/> \$6,000	半頁 Half page [13 cm (L) x 18 cm (W)]	<input type="checkbox"/> 請刊登 “_____” 致意” Please print：“With the Compliments of _____”

(IV) 惠捐善款 General donation

本人/公司未暇出席晚會，並且不擬出任贊助人，但樂捐善款以：

I/We will not attend the Charity Dinner Show and have no intention to be a Patron but would like to donate the following to：

(1)☐ 幫助貧病者接受免費門診服務 Help needy patients to receive free outpatient services：

☐ 480名/persons (\$36,000) ☐ 360名/persons (\$27,000) ☐ 240名/persons (\$18,000)  
☐ 120名/persons (\$9,000) ☐ 40名/persons (\$3,000) ☐ \$ \_\_\_\_\_

(2)☐ 幫助一名貧病者支付其病床費用 Pay for the bed charges for a needy patient：

☐ 1年/year (\$36,000) ☐ 9個月/months (\$27,000) ☐ 6個月/months (\$18,000)  
☐ 3個月/months (\$9,000) ☐ 1個月/month (\$3,000) ☐ \$ \_\_\_\_\_

(3)☐ 支持免費醫療服務(由東華三院因應情況調撥於較急需的免費醫療項目上)

Support free medical services (on more urgent free medical services items to be decided by the Tung Wah Group of Hospitals)

現附上劃線支票開列港幣 \_\_\_\_\_ 元正

(支票號碼：\_\_\_\_\_ )，支付以上捐款。

Enclosed is a crossed cheque for \$ \_\_\_\_\_

(cheque no.: \_\_\_\_\_) in payment of the above donation.

捐款善長及鳴謝芳名

Donor's name for acknowledgement arrangements：

\_\_\_\_\_ 先生/女士\* Mr./Ms.\*

捐款收據芳名(如與捐款善長不同)

Name on receipt (If different from donor's name)：

\_\_\_\_\_ 先生/女士\* Mr./Ms.\*

地址 Address：\_\_\_\_\_

\_\_\_\_\_

聯絡人 Contact person：\_\_\_\_\_ 先生/女士\* Mr./Ms.\*

電話 Tel：\_\_\_\_\_ (日間Daytime)

傳真 Fax：\_\_\_\_\_

電郵地址 E-mail address：\_\_\_\_\_

日期 Date：\_\_\_\_\_

簽署 Signature：\_\_\_\_\_

善長留言 Donor's message：\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

附註Remarks：

1. 如蒙支持善舉，請於**2009年8月3日前**將填妥的捐助表格及捐款寄交本院。請將下方的「簡便回郵」標籤剪下及貼在空白信封上投寄，無須貼上郵票。您亦可先將表格傳真至本院(號碼：2559 6835)。  
Please complete and return this form together with the donation to us **before 3/8/2009**. Please cut the freepost label at the bottom, adhere it to a blank envelope and mail it. No postage is required. You may either fax the form to 2559 6835 in advance.

2. 支票抬頭請寫「東華三院」或“Tung Wah Group of Hospitals”。  
Please make your cheque in favour of “Tung Wah Group of Hospitals”.

3. 上述(IV)項的一般捐款可寄交本院或直接存入恒生銀行各分行的東華三院專戶。  
For making a donation of item (IV), you can pay-in the amount to the Tung Wah's account at any branches of Hang Seng Bank.

4. 捐助東華三院滿\$100的善款可獲政府免稅。  
Donation of \$100 or more to Tung Wah is tax deductible.

5. 如不需要捐款收據以及安排鳴謝，可透過「繳費靈」捐款，東華三院商戶編號：9216。  
If donation receipt and acknowledgement are not required, you may donate through PPS bill payment service by a tone phone (Merchant code of Tung Wah：9216).

6. 欲詢詳情，請致電1878 333或2859 7538予本院籌募科。  
For enquiry, please call the Fund-raising Division at 1878 333 or 2859 7538.

7. 您向本院提供的個人資料只限作籌募活動及寄回捐款收據之用。倘若您不願意再收到本院的籌募活動資料，請將信封上載有您的姓名及地址的標籤剪下及寄回本院辦理。  
The personal data provided will be used only for our fund-raising events and issuance of donation receipts. If you do not want to receive our fund-raising information, please return the label on the envelope to us for follow-up arrangement.

簡便回郵  
10號  
Tung Wah Group of Hospitals  
Freepost No. 10