☑我願意成為樂施之友,每月捐款:

I want to be an Oxfam Partner and donate monthly:



捐款者資料 Donor's Information: (請盡量以	英文正楷填寫 IN BLOCK LETTERS)
英文姓名 Name: 姓 Surname 名 First Name	中文姓名 Chinese name:
性別 Sex: 出生年份 Year of Birth:_	行業 Occupation:
身份證號碼 ID Card No.:	電郵 E-mail: on only.)
聯絡電話 Tel.:(日間 Day)	(晚間 Evening)
地址 Address:	
通訊語言 Language: □ 中文 Chinese □ 英	文 English
收據姓名(如與上述不同) Name on Receipt (if diff	erent from above):
	作捐款處理、寄發收據及有關捐款通訊用途。為了與您緊密聯繫·向您匯報樂施會的 的服務提供者將會透過您提供的聯絡方法(包括姓名、電話、電郵及郵寄地址)·為您 您不願意收到上述資訊及資料·請在方格上加上剔號。口
administration, receipt issuance and related communications. To conn well as advocacy, development and fundraising progress, Oxfam Hong	nd will be used by Oxfam and its service providers for the purposes of donation ect closely with you and to keep you informed of Oxfam's work against poverty as Kong and its service providers may use your contact information (name, telephone plunteer recruitment and survey administration. If you would not like to receive such
請選擇一個或多個捐款項目及其捐款額 Pleas	se choose type(s) of project & donation amount:
□ 全球項目 Global projects (21 T2001) □ 中國項目 China projects (21 T2002)	MOP MOP
→ 中國項目 China projects (21 T2002)→ 教育項目 Education projects (21 T2003)	MOP Thank you!
□ 非洲項目 Africa projects (211T2004)	MOP ITTAIN YOU!
□ 小農項目 Smallholder farmers projects	
— There is a small result of project	
→ 每月捐款總額(澳門幣) Monthly Dona	tion Amount MOP

澳門宋玉生廣場 258 號建興龍廣場 18 樓 F 室

Alameda Dr. Carlos d'Assumpção, No.258, Praça Kin Heng Long, 18 Andar F, Macau

澳門捐款者熱線 Macau Toll Free Hotline: 0800809

香港北角馬寶道 28 號華匯中心 17 樓

Oxfam Hong Kong, 17/F China United Centre, 28 Marble Road, North Point, Hong Kong

電郵 Email: ds@oxfam.org.hk 網址 Website: www.oxfam.org.hk

款方法 Donated by: 請選擇 🛛 信用	卡 Credit Card 或 or ☑ 自動轉賬 Autopay
信用卡 Credit Card (請傳真至 Please fax t	o 852-2590 6880 或 Whatsapp 至 to 852-6685 0500)
□ VISA □ MASTER □ UnionPay	
信用卡號碼 Card No.:	R
信用卡有效期至 Card expiry date:	
· · · · · · · · · · · · · · · · · · ·	OXFAM Without Poverty
每月捐款總額(澳門幣) Monthly donation amount	
持卡人簽名 Cardholder's signature:	
(信用卡每月捐款將在收到此表格後約 10 個工作天生效,並會在每直至閣下另行通知。Monthly donation payment will become effect	月 15 號左右過數。每月捐款於該信用卡到期再續後將繼續自動過數 ve 10 working days after receipt of this form. Thereafter, transactior thly donation via credit card will continue upon renewal as it expire
自動轉賬表格(只限華僑永亨銀行戶口 Autopay Authorization Form (For Bank Ac (請郵寄正本回樂施會 Please send back the orig	count holder of Banco OCBC Weng Hang) inal to Oxfam)
港幣捐款會兌換為澳門幣計算。All donations in HKD are co收款之一方(受益人):	onverted to MOP. 收款賬戶號碼 Account no. to be credited :
澳門樂施會 Oxfam in Macau	060-743342-001
聯絡電話 Telephone no.	銀行戶口持有人簽名 Signature (s) of Bank Account Holder
 致:華僑永亨銀行 1. 直至另行通知為止・本人(等)/本公司茲授權華僑永亨銀行(以上簡稱 1 (ア)・由本人(等)/本公司在 貴行開立之賬戶內轉賬予所指示之收款賬戶之 本人(等)/本公司同意 貴行無義務確定該等支款通知是否已交予本人(等 本公司。 本人(等)/本公司願共同及分別承擔因該等支款而令本人(等)/本公司爰銀行賬戶出現透支(或令現時透支增加)之全部責任。 4. 本人(等)/本公司明瞭如該等支款未能自本人(等)/本公司之銀行賬戶內3付・一切責任概與 責行無涉。 5. 本人(等)/本公司同意任何取銷或更改本授權書之通知・須於該等支款進行期前不少於一星期接予 責行・並本人(等)/本公司會同時給予藥施會有關效如。 6. 本大(等)/本公司同意如本人(等)/本公司之賬戶: a) 如 貴行接獲樂施會取銷該收款通知(如適用);或	(hereinafter referred as "the Bank") to effect transfers from my/our account to account(s) as instructed. I/We agree that the Bank will not be obliged to ascertain whether or not notic debit has been given to me/us. I/We jointly and severally accept full responsibilities for any overdraft (or increase existing overdraft) on my/our bank account which may arise as a result of any debit(s). I/We understand that the Bank will not be liable for any responsibilities due to del to my/our bank account is dishonored. I/We agree that any notice of cancellation or change of this authorization should given to the Bank at least one week prior to the date on which the debit(s) is mad my/our bank account. I/We agree that at the same time such notice shall be give Oxfam in Macau. I/We agree that if the transfers are unable to be effected: a) If the bank has been informed by Oxfam in Macau for cancellation of credit (if applicable); or b) If there is no transfer effected in my/our said account for a period of two months. The Bank may at its own discretion case to comply with the instructions of authorization without prior notice to me/us. I/We agree that this authorization will be automatically invalid if the settler account has been closed. I/We agree that should there be insufficient funds in my/our account to meet transfer hereby authorized, the Bank may cancel this authorization at may tim one week's written notice. I/We agree that the Bank has the right to levy a service charge for this transfer an entitled to charge as usual. The Bank may cancel this authorization at may tim one week's written notice. I/We agree that the Bank has the right to levy a service charge for this transfer such charge will be debited from my/our bank account. I/We agree that the Bank has the right to levy a service charge for this transfer such charge will be debited from my/our bank account. I/We agree that the Bank has the right to levy a service charge for this transfer such charge will be debited from my/our bank account. I/We
 直至另行通知為止。本人(等)/本公司茲授權華僑永亨銀行(以上簡稱 1	Until further written notice, I/we hereby authorize BANCO CCBC WENG HANG, (hereinafter referred as "the Bank") to effect transfers from my/our account to account(s) as instructed. I/We agree that the Bank will not be obliged to ascertain whether or not notic debit has been given to me/us. I/We jointly and severally accept full responsibilities for any overdraft (or increase existing overdraft) on my/our bank account which may arise as a result of any debit(s). I/We understand that the Bank will not be liable for any responsibilities due to det to my/our bank account is dishonored. I/We agree that any notice of cancellation or change of this authorization should given to the Bank at least one week prior to the date on which the debit(s) is mad my/our bank account. I/We agree that at the same time such notice shall be given the Bank at least one week prior to the date on which the debit(s) is mad my/our bank account. I/We agree that at the same time such notice shall be given the agree that if the transfers are unable to be effected: a) If the bank has been informed by Oxfam in Macau for cancellation of credit (if applicable); or b) If there is no transfer effected in my/our said account for a period of two months. The Bank may at its own discretion case to comply with the instructions of authorization without prior notice to me/us. I/We agree that should there be insufficient funds in my/our account to meet transfer hereby authorized, the Bank has the right not to effect such transfer are entitled to charge as usual. The Bank may cancel this authorization at may tim one week's written notice. I/We agree that if the said form to any other third party. Under no circumstances my Bank shall be responsible.
 直至另行通知為止。本人(等)/本公司茲授權華僑永亨銀行(以上簡稱 1	Until further written notice, I/we hereby authorize BANCO COBC WENG HANG, (hereinafter referred as "the Bank") to effect transfers from my/our account to account(s) as instructed. I/We agree that the Bank will not be obliged to ascertain whether or not notic debit has been given to me/us. I/We jointly and severally accept full responsibilities for any overdraft (or increas existing overdraft) on my/our bank account which may arise as a result of any sidebit(s). I/We understand that the Bank will not be liable for any responsibilities due to det to my/our bank account is dishonored. I/We agree that any notice of cancellation or change of this authorization should given to the Bank at least one week prior to the date on which the debit(s) is mad my/our bank account. I/We agree that at the same time such notice shall be give Oxfam in Macau. I/We agree that if the transfers are unable to be effected: a) If the bank has been informed by Oxfam in Macau for cancellation of scredit (if applicable); or b) If there is no transfer effected in my/our said account for a period of two months. The Bank may at its own discretion case to comply with the instructions of authorization without prior notice to me/us. I/We agree that this authorization will be automatically invalid if the settler account has been closed. I/We agree that should there be insufficient funds in my/our account to meet transfer hereby authorized, the Bank has the right not to effect such transfer an entitled to charge as usual. The Bank may cancel this authorization at may tim one week's written notice. I/We agree that the Bank has the right to levy a service charge for this transfer such charge will be debited from my/our bank account. I/We agree that if this authorization form is not directly sent to my/our Bank, agree to take all the legal or /and economical responsibilities caused by disclot the details of the said form to any other third party. Under no circumstances my Bank shall be responsible.
1. 直至另行通知為止、本人(等)/本公司茲授權華僑永亨銀行(以上簡稱 了)、由本人(等)/本公司在 實行開立之賬戶內轉賬予所指示之收款賬戶本人(等)/本公司同意 實行無義務確定該等支款通知是否已交予本人(等)本公司。	Until further written notice, I/we hereby authorize BANCO CCBC WENG HANG, (hereinafter referred as "the Bank") to effect transfers from my/our account to account(s) as instructed. I/We agree that the Bank will not be obliged to ascertain whether or not notic debit has been given to me/us. I/We jointly and severally accept full responsibilities for any overdraft (or increase existing overdraft) on my/our bank account which may arise as a result of any debit(s). I/We understand that the Bank will not be liable for any responsibilities due to det to my/our bank account is dishonored. I/We agree that any notice of cancellation or change of this authorization should given to the Bank at least one week prior to the date on which the debit(s) is mad my/our bank account. I/We agree that at the same time such notice shall be give Oxfam in Macau. I/We agree that if the transfers are unable to be effected: a) If the bank has been informed by Oxfam in Macau for cancellation of credit (if applicable); or b) If there is no transfer effected in my/our said account for a period of two months. The Bank may at its own discretion case to comply with the instructions of authorization without prior notice to me/us. I/We agree that this authorization will be automatically invalid if the settler account has been closed. I/We agree that should there be insufficient funds in my/our account to meet transfer hereby authorized, the Bank has the right not to effect such transfer an entitled to charge as usual. The Bank may cancel this authorization at may tim one week's written notice. I/We agree that if this authorization form is not directly sent to my/our Bank, agree to take all the legal or /and economical responsibilities caused by discle the details of the said form to any other third party. Under no circumstances my Bank shall be responsible.