To :	Board Secretary Alice Ho Miu Ling Nethersole Charity Foun Room 29, 7/F, Block J, 11 Chuen On Road,		Tel No:2689 2292 Fax No:2661 3615				
	Don	ation	Form				
I / W	e would like to support the following service	:-					
	Chaplaincy Services (AHNH)		Chaplaincy S	Services (PYN	(EH)		
	AHNH Health Resource Centre Service	_			Patient Resource Serv	ice	
	Elderly Service			•	ehabilitation Mission		
	General Donation			-			
	Designated Donation (Please specify) (Otherwise, arrangements will be made in accordance wit	h our se	ervice needs)				
Types	s of Donation						
	Cash HK \$	_					
	Crossed cheque HK\$		ble to "Alice	Ho Miu Lin	ng Nethersole Chai	rity Foundation''	
	Donation in-kind (e.g. furniture and equipment) *						
	Please specify the description and quantity :	Please specify the description and quantity :					
	Exact / estimated value HK\$			Estimated main onsumable co			
Dono	<u>r Details</u>						
	Name (Block Letters) :						
	Title : Dr. Rev.		Mr.	Mrs.	Miss	Other	
	Mailing Address :						
	Phone No. :			Da	ite :		
			-				
	<b>Dersonal Information Collection Statement</b> Alice Ho Miu Ling Nethersole Charity Foundation (AHNCF) undertakes to comply with the requirements of the Personal Data (Privacy) Ordinance to ensure that personal data kept are accurate and securely kept. To safeguard interest of our data subject, AHNCF collects personal data from you for the purposes of handling donations, issuing receipts, and publishing acknowledgement of donation, and will only use your personal data for such purposes and for promotional purposes. AHNCF may use your personal data for the purposes of providing you with information of AHNCF, fundraising appeal, activities invitation as well as for feedback collection and related promotion purposes. However, we cannot use your personal data unless we have received your consent. You may contact us at 26892292 or cf@nethersole.org.hk for enquiry or the updating of your personal data. Upon your requests at any time, we will cease to use your personal data for promotional purposes. Please sign the form to indicate your agreement to the proposed use of personal data as stated above. If you object to it, please do not sign.						
	Donor's Signature :			Dat	e :		
Dona	tion of HK\$100 or over is tax-deductible, an o		-	-	-		
For 0	ffice Use Only						
	The acceptance of donation is approved. The acceptance of donation is not approved	becaus	se				
Appro	oved by <sup>#</sup> :	Desi	gnation :		Date :		
	For donation in-kind, proper approval must be obtained Head of CF Service Units / Department	ed befor	re any acceptanc	e			