

DONATION FORM

Your support will help make a big difference to the education and training for professional healthcare workforce in Hong Kong. If you would like to make a donation to support our development, please complete this form and mail it together with your donation to **Public Affairs Unit, The Open University of Hong Kong, 30 Good Shepherd Street, Ho Man Tin, Kowloon**. You can also donate online at ioh.ouhk.edu.hk/donate (for donation between HK\$100 and HK\$50,000).

Donation Amount

I/We would like to support The OUHK Jockey Club Institute of Healthcare development project and make a donation of:

HK\$10,000 HK\$50,000 HK\$100,000 HK\$500,000 HK\$ _____

*Donations of HK\$100 or above are tax deductible in Hong Kong with official receipt. The official receipt will be sent to your mailing address in due course.

A donor will acknowledging donors who have donated HK\$100,000 or above will be set up at the Jockey Club Institute of Healthcare. Details will be released in due course.

The Government has launched the 7th Government Matching Grant Scheme in August 2017. All donations received before 31 July 2019 will have a chance to match the government grant on either a dollar-for-dollar (for the floor of \$12 million) or a \$1 grant for \$2 donation basis (beyond the floor) until the grant is depleted or we have met the ceiling of \$100 million. Please allow us to submit your donation for matching to significantly multiply the impact of your benevolence.

delete as appropriate

I/We **agree/disagree**# to submit the above donation to match with the 7th Government Matching Grant Scheme.

Donor Information

Name in English: _____ (For use on donor wall)

Name in Chinese: _____ (For use on donor wall)

Contact Person (if different from above): _____ Position: _____

Name on Receipt: _____

Correspondence Address (for donation receipt): _____

Contact Number: _____ E-mail Address: _____

Payment Methods

By Crossed Cheque (Please make it payable to "The Open University of Hong Kong")

By Credit Card (Administration charges will be incurred on the OUHK)

Visa MasterCard

Card No.: _____ - _____ - _____ - _____ Expiry Date: _____ (MM)/ _____ (YY)

Cardholder's Name: (IN BLOCK LETTERS) _____

I hereby authorize The Open University of Hong Kong to debit the above donation amount from my credit card account.

Cardholder's Signature

The Open University of Hong Kong intends to use your personal data (i.e. your name, contact details, and donation information) for donation solicitation, acknowledgement, record, event promotion and update of our development projects in the future. Please be assured that the University will obtain your consent before your personal data is used and will not transfer your personal data to a third party for direct marketing purpose.

I **do not wish** to be contacted by The Open University of Hong Kong for the aforesaid purposes.

Signature: _____ Date: _____

If you wish to make access to, correction of, or removal of your personal data held by the University, please contact Public Affairs Unit on 2768 6366.