

請把表格印出，填妥後寄回 **澳門郵政信箱 478 號 奧比斯澳門辦事處** 收。**信用卡捐款**可傳真至 **(853) 2835 6061**。  
Please print out the form, complete and return to **Orbis Macau, P.O. Box 478, Macau**.  
**Credit Card donations** can be faxed to **(853) 2835 6061**.



**請慷慨解囊，將希望之光帶給所有失明人**  
**Your generosity will bring hope in sight to the most vulnerable people**

#### 捐款者個人資料 DONOR'S PERSONAL DATA

捐款者編號 (如適用) Donor ID (if applicable)	
<input type="checkbox"/> 先生 Mr.	<input type="checkbox"/> 女士 Ms.
<input type="checkbox"/> 小朋友 Kid (年齡 Age: _____)	
英文姓名 (請在姓氏下劃線) English Name (Please underline surname)	
中文姓名 Chinese Name	
澳門居民身份證號碼 Macau BIR No.	
(只用作避免捐款者記錄重複) (To avoid donor record duplication only)	
日間聯絡電話 Daytime Tel No.	出生日期 Date of Birth DD/ MM/ YYYY
通訊地址 (請盡量以英文填寫) Postal Address (Please fill in English)	
電郵地址 Email Address	
通訊語言選擇 Preferred Language for All Communication	
<input type="checkbox"/> 中文 Chinese	<input type="checkbox"/> 英文 English

#### 捐款金額 DONATION AMOUNT

☐ 本人願意 **每月** 定期捐助奧比斯  
I would like to donate on a **monthly basis**:

澳門幣 ☐ MOP150 ☐ MOP250 ☐ MOP500 ☐ MOP1,000  
☐ 其他金額 (多少無拘) Any amount will help MOP \_\_\_\_\_

請選擇其中一項 (未有選擇者將成為奧比斯之友)  
Please tick either one (will be considered as Orbis Friend if both are not checked):

☐ 成為「奧比斯之友」，支持奧比斯全球救盲工作。Be an Orbis Friend and support Orbis's sight-saving programmes worldwide.

☐ 成為「奧比斯童望之友」，支持奧比斯全球防治兒童失明工作。Be an Orbis Kids Sight Friend and support Orbis's paediatric sight-saving work worldwide.

☐ 本人願意 **一次過** 作個別捐款，捐贈以下款項：  
I would like to make a **one-off donation** of the following amount:

澳門幣 ☐ MOP300 ☐ MOP500 ☐ MOP1,000 ☐ MOP5,000  
☐ 其他金額 (多少無拘) Any amount will help MOP \_\_\_\_\_

#### 捐款方法 DONATION METHODS

##### (I) 一次性捐款 One-off donation

☐ 銀行直接存款 By bank deposit

銀行 Bank	澳門幣 MOP	港幣 HKD
澳門大西洋銀行 BNU	9005 198 391	9005 198 357
中國銀行 Bank of China	01-01-20-804446	01-11-23-862971
匯豐銀行 HSBC	001-038041-091	001-038041-101
大豐銀行 Tai Fung Bank	201-1-09590-5	101-1-11900-5
華僑永亨銀行 OCBC Wing Hang Bank	031 658 001	579 186 001

☐ 支票捐款 By cheque  
支票號碼 Cheque number \_\_\_\_\_  
抬頭請寫「澳門奧比斯」 Please make cheque payable to Orbis Macau.

☐ 銀行網上理財服務 By Internet Banking  
大豐銀行、中國銀行、華僑永亨銀行或澳門大西洋銀行客戶可使用網上理財作一次性捐款  
If you are a Bank of China, OCBC Wing Hang Bank, Tai Fung Bank or BNU bank account holder, you can donate via Internet Banking.

☐ 中國銀行電子理財服務 By BOC digital services  
中國銀行客戶可使用中銀 e 道及流動銀行作一次性捐款  
If you are a Bank of China account holder, you can donate via BOC eChannel and BOC Mobile Banking.

☐ 信用卡捐款 By credit card  
請填妥右邊信用卡資料欄  
Please fill out the credit card information in the right column

★ 請寄回此表格及存款收據正本，奧比斯將依據您的地址發捐款收據。  
Please return this form and the original copy of your bank deposit advice. Receipts will be issued according to your record with Orbis.

☐ 網上一次性捐款 Online one-off donation  
請登入 Please go to [www.orbis.org/macau-donate](http://www.orbis.org/macau-donate)  
網上捐款無需交回此表格 For online donation, you do not need to return this form.

##### (II) 每月捐款 Monthly donation

☐ 澳門大西洋銀行戶口自動轉賬 BNU account direct debit  
☐ 中國銀行戶口自動轉賬 Bank of China account direct debit  
☐ 大豐銀行戶口自動轉賬 Tai Fung Bank account direct debit  
☐ 華僑永亨銀行戶口自動轉賬 OCBC Wing Hang Bank account direct debit  
※自動轉賬授權書將於稍後寄上  
The direct debit authorization form will be sent to you later.

##### ☐ 信用卡 一次性 或 每月 捐款 Credit card **one-off** or **monthly** donation

☐ VISA 卡 ☐ 萬事達  
VISA Card MasterCard

信用卡有效期至 月/ 年 (須於三個月內有效)  
Card valid until MM/ YY (should be valid for the next 3 months)

信用卡號碼  
Credit card number

信用卡簽發銀行  
Credit card issuing bank

信用卡持有人姓名  
Cardholder's name

請於其中一適當方格內加上 ✓ 號 Please tick one appropriate box ONLY.

☐ **一次性捐款** 請於本人之信用卡賬戶內一次過扣除以上賬款  
**One-off donation** Please charge my credit card once for the above specified amount.

☐ **每月捐款** 本人現授權澳門奧比斯由本人之信用卡賬戶內定期扣除上述之賬款，直至本人另行通知為止。本人同意此授權書於本人之信用卡有效期後及獲續發新卡時繼續生效，並毋需另行填寫授權書。如需要取消或更改本授權書，請於取消或更改生效日期七個工作天前通知奧比斯。

**Monthly donation** I hereby authorize Orbis Macau to charge my credit card account for the amount specified in a regular manner as agreed upon by me and Orbis Macau until further notice. I agree the validity of this agreement will continue before or after the expiry date of my credit card account. Cancellation or variation of this authorization shall be given to Orbis Macau seven working days before the date on which such cancellation or variation is to take effect.

信用卡持有人簽署 Credit cardholder's signature \*

日期 Date

\* 簽名必需與閣下之信用卡簽名完全相同，表格上如有任何塗改，請在旁簽署。  
Please ensure that you sign the form and any changes the same way as you sign your credit card account.

##### ☐ 網上登記每月捐款 Online monthly donation

請登入 Please go to [www.orbis.org/macau-donate](http://www.orbis.org/macau-donate)  
網上登記無需交回此表格 For online registration, you do not need to return this form.

☐ 請寄回收據 Please send me a receipt.  
如收據抬頭與捐款者本人，請以英文列明：\_\_\_\_\_  
若捐款者姓名及地址欠奉，恕未能發收據。  
If the recipient's name differs from the donor, please specify.  
No receipt will be issued if either donor's name or address is not provided.

☐ 為幫助節省行政開支，本人不需要收據  
To help save administrative costs, please do not send me a receipt.

**澳門奧比斯 Orbis Macau:**

**電話 Enquiry: 2830 0787 傳真 Fax: 2835 6061**

以上資料只會作為發收據及募捐用途。我們可能將有關資料提供於第三者服務供應人進行以上有關運作，但所有資料均絕對保密。The above information will be used for receipting and fundraising purposes only. We may furnish your data on a strictly confidential basis to third parties, who provide services to us in relation thereto.

奧比斯專用 FOR ORBIS USE

DDA to bank	Handled by/on	Verified by
Start date		
Last value date		
Close reason		

☐ CY\_\_ 80201 (Gen printed) ☐ CY\_\_ 81501 (KS printed)