東區尤德夫人那打素醫院 Pamela Youde Nethersol

Freepost Service 2 2

## 3. 交付捐款辦法 Donation Methods

支票 Crossed Cheque 抬頭請寫「東區尤德夫人那打素醫院慈善信託基金」 Please make cheque payable to "The Pamela Youde Nethersole Eastern Hospital Charitable Trust" or "The PYNEH Charitable Trust" 直接存款至東區尤德夫人那打素醫院慈善信託基金户口 Direct Bank Deposit to "The Pamela Youde Nethersole Eastern Hospital Charitable Trust" 東亞銀行 BEA: 015-518-40-400166-2 中國銀行(香港) BOC(HK): 012-875-0-042632-7 □ 現金捐款 In Cash 請把捐款連同表格交至東區尤德夫人那打素醫院主座地下大堂 Please hand in the completed form together with donation to the Shroff on G/F Main Block, Pamela Youde Nethersole Eastern Hospital

### 個人資料收集聲明 Personal Information Collection Statement

本表格所收集閣下的個人資料將嚴格保密處理,並只會向東區尤德夫人那打素醫院慈 善信托基金(本基金)及東區尤德夫人那打索醫院(東區醫院)提供,以用作與籌募 相關事宜及發出收據之用。

Your personal data collected in this form will be kept strictly confidential and made available only to The Pamela Youde Nethersole Eastern Hospital Charitable Trust (the Trust) and Pamela Youde Nethersole Eastern Hospital (PYNEH) to use for purposes relating to donation matters and for issuing receipts.

根據《個人資料(私隱)條例》,由於本基金及東區醫院擬使用閣下的個人資料(即 你的姓名和聯絡資料)進行慈善募捐,我們需先取得閣下的同意,但本基金及東區醫 院在未得到閣下的同意之前不會如此使用閣下的個人資料

Under the Personal Data (Privacy) Ordinance, the Trust and PYNEH need to obtain your consent as we intend to use your personal data (i.e. your name and contact data) for solicitation of donations for charitable purposes to the Trust and PYNEH but will not so use your personal data unless your consent is received.

#### 使用個人資料作籌募推廣 / Use of Personal Data for Solicitation of Donations

如閣下願意繼續支持本基金及東區醫院的慈善工作,並同意我們使用閣下的個人資 料為本基金及東區醫院進行慈善募捐,請於下方空格簽署。如閣下不同意,則無需

Please sign in the space below if you agree to support the charity work of the Trust and PYNEH and the use of your personal data for solicitation of donations to the Trust and PYNEH. If you find such use not acceptable, your signature is not required.

閣下有權隨時查閱和改正本基金及東區醫院持有關於閣下的個人資料。如要行使上述 權利或不欲再收到本基金及東區醫院有關慈善募捐的推廣資訊,請致電2595-5925或 電郵至pyneh\_ct@ha.org.hk與東區醫院財務部助理經理聯絡

You have rights of access and correction with respect to your personal data held by the Trust and PYNEH. If you wish to exercise these rights or you do not wish to receive any promotional materials on solicitation for donations to the Trust and PYNEH afterwards. please contact the Assistant Finance Manager of PYNEH at 2595-5925 or by email pyneh ct@ha.org.hk.

參加者簽署: Signature of the Participant:	
日期: Date:	

## 注意事項 Important Notes:

- 1. 請依循工作人員指示。參加者須自律,確保個人安全及不可危害他人安全。 Participants should follow the instructions of the duty personnel throughout the event to ensure his/her own and other's safety.
- 2. 沿途請保持地方清潔,切勿亂拋垃圾。 Please do not litter and keep the environment clean.
- 3. 請自備飲品、食物、防曬物品及雨具,並做好防蚊措施。
- Please bring sufficient food, drinks, caps or rain gear as necessary and take anti-mosquito measures.
- 4. 為響應環保,歡迎穿著過往東區醫院日服裝參加活動。 For the sake of environmental protection, please re-use the PYNEH Day T-shirt of previous years.
- 5. 基於安全理由,小童必須由大人陪同參加活動。
- For safety reason, children must be accompanied by adults.
- 在往返本院或參加活動後,如遇上任何財物損失或傷亡,東區尤德夫人那打素 醫院均不負上任何責任。 Pamela Youde Nethersole Eastern Hospital shall not be liable for any

accident or injury to participants or their properties before and after this charity activity.

- 活動當日若天氣情況欠佳,如天文台於早上7時或以後懸掛3號或以上颱風訊 號或任何暴雨警告,慈善步行將會取消,已提交之善款均不會退回。籌委會將 因應實際天氣情況決定嘉年華會的安排,如有查詢請致電2595 6111。 In case of poor weather, such as hoisting of typhoon signal no. 3 or above or
- any rainstorm warning after 7am, the Walkathon may be cancelled. All donations collected for the event will not be returned to participants/sponsors/donors. The Hospital may proceed with the Carnival, subject to the weather conditions. For enquiry, please call 2595 6111.
- 最高籌款大獎將會以2016年11月4日下午6時的籌款總額為準。如以團體名義 參與,甄選條件將以團體籌款總額計算。郵寄報名表格,並非以郵籤為準,建 議參加者預留足夠時間郵遞表格。

Award winners of The Fundraising Award contest will be decided based on the enrollment and/or donation amount raised by 6pm, 4 November 2016. If entering as a team, the donation amount raised would only be counted as a team. For forms to be submitted by mail, please allow enough time for posting as postmark date would not be regarded as submission date.

- 所有於2016年11月4日或之前收到之報名將於2016年11月21日前確認。如 未有確認,請致電聯絡電話查詢。
- Confirmation will be issued on or before 21 November 2016 for enrollment forms received on or before 4 November 2016. Please contact the Organizing Committee if no confirmation was received.
- 10. 由於活動名額有限,所有慈善步行參加者必須預先報名。 Due to limited quotas, advance enrollment for the charity walkathon is
- 11. 捐款港幣 100 元或以上可憑收據申請稅項減免,捐款收據將於活動日後一個月 內以郵寄方式分批寄予個人參加者, 而團體參加者的收據將寄予團體/東區醫院 部門代表代為分發。建議各參加者自行備份贊助名單,以便日後查閱及分發收

Donations HK\$100 or above are tax deductible with a receipt which would be sent out by logs within 1 month after the event. For individual category, the receipt(s) would be sent to individual participants. For team category, the receipt(s) would be sent to the team leaders / PYNEH department representatives for distribution. Please make photocopy of this form and the bank-in slip if needed.

12. 大會保留限制及拒絕報名的權利。

The Organizing Committee reserves the right to refuse any application for any

13. 如有查詢,請於星期一至五,上午9時至下午6時致電2595 6697與籌委會職

For enquiries, please contact the Organizing Committee at 2595 6697 during office hour.

14. 大會保留修改以上資料之權利而不作另行通知。

The Organizing Committee reserves the right to make any necessary changes to the above information without giving prior notice to the participants.



請在此對摺及封口 Please fold and seal here

# 活動詳情 Program Details

## 目的 Event Objectives:

- 1.為「東區尤德夫人那打素醫院慈善信託基金」籌款以改善醫院病人服務 To raise fund for "The Pamela Youde Nethersole Eastern Hospital Charitable Trust" to improve patient services
- 2.加強社區伙伴合作及推動環保

To promote community partnership and environmental protection

3.凝聚員工團隊精神

To engage staff and team building

4. 增加病人及其家屬與醫護人員之互動

To enhance interaction between patients, patients' families and health

# 慈善步行 Charity Walkathon

集合時間: 上午9時正 Registration Time: 9:00am 開步禮: 上午9時30分 Kick-off Ceremony: 9:30am

集合地點: 東區尤德夫人那打素醫院主座大樓3樓

Assembly Point: 3/F. Main Block.

Pamela Youde Nethersole Eastern Hospital

Pamela Youde Nethersole Eastern Hospital

終點: 東區尤德夫人那打素醫院主座大樓2樓花園

Finishing Point: 2/F Outdoor Garden, Main Block,

名額: 1.500名(名額有限,先到先得) Quota: 1,500 (First-come, first-served)

# 慈善步行路線圖 Route Map:



短線 Short Route: 全程石屎路,

部份路段傾斜 Concrete path.

Part of the route is uphill

步行時間約45分鐘

Walking Time approximately 45 minutes

### 長線 Long Route:

大部份石屎路 後段山坡傾斜

Concrete path.

Around half of the route is

approximately 90 minutes

uphill

步行時間約90分鐘 Walking Time

# 嘉年華 Carnival

時間: 上午10時30分至下午2時30分

Time: 10:30am to 2:30pm

東區尤德夫人那打素醫院主座大樓2樓及3樓

2/F & 3/F, Main Block, Venue:

Pamela Youde Nethersole Eastern Hospital

特色商品義賣、攤位遊戲、戶外表演等 Program: Charity Bazaar, Stamp Rally Games,

Outdoor Performances, etc.

## 獎項 Awards:

凡於2016年11月4日下午6時前成功報名參加慈善步行者均可按資

Eligible participants being enrolled before 6pm. 4 November 2016 are entitled to compete for the following awards:

1. 最高籌款額獎(東區醫院部門)

**Highest Donation Amount Raised (PYNEH Department)** 

2. 最高籌款額獎(東區醫院職員)

**Highest Donation Amount Raised (PYNEH Staff)** 

3. 最高籌款額獎(團體)

Highest Donation Amount Raised (Organization)

4. 最高籌款額獎(個人)

Highest Donation Amount Raised (Individual)

5. 最踴躍參與獎(東區醫院部門)

**Best Participatory (PYNEH Department)** 

6. 最踴躍參與獎(病人組織)

**Best Participatory (Patient Group)** 

7. 最踴躍參與獎(學校)

Best Participatory (School)

8. 最踴躍參與獎(地區組織)

9. 最躁躍參與獎(社會服務機構)

Best Participatory (Welfare Agency)

10.最踴躍參與獎(義工組織)

**Best Participatory (Volunteers)** 

Best Participatory (Local Body)

11.最踴躍參與獎(其他組織)

**Best Participatory (Others)** 

\* 大會就團體類別之分類保留最終決定權

The Organizing Committee reserves the right on the categorization of organization.

# 紀念品 Souvenir:

1. 每位慈善步行參加者均會獲贈證書一張。

Every Walkathon participant will receive a certificate of participation.

2. 凡籌得善款超過港幣五十元之參加者均可獲贈紀念品一套。

Any participant achieved sponsorship / donation to HK\$50 will receive a

## 活動網址 Event Webpage:

http://www.ha.org.hk/pyneh/pynehday2016

## 1. 報名表格 Registration Form

S/N#

所有有意參加慈善步行或樂意捐款的人士,請填妥此表格,連同贊助表格、 支票/銀行存款收據(正本)交至柴灣樂民道3號東區尤德夫人那打素醫院主 座大樓2樓總務部。

For those who are interested in joining the charity walkathon or making donation, please complete and submit the "Registration Form" and "Sponsorship Form", together with the cheque / bank-in slip (original) to General Registry, 2/F Main Block, Pamela Youde Nethersole Eastern Hospital.

## 參加者資料 Participant Details:

I. 東區醫院職員 PYNEH Staff				
□ 是,東區醫院部門 Yes, PYNEH Department: □ 否 No				
II. 参加者名義 Participant Category  (只適用於參與慈善步行者 Only applicable to Walkathon participants)  *每一位參加者必須獨立填寫一份表格  * Each participant has to complete a set of registration form  本人是團體/東區醫院部門成員,並願意以團體名義參加慈善步行 # I am the organization / PYNEH department member and would like to join the team category of charity walkathon # 所屬團體/東區醫院部門名稱:  Organization / PYNEH Department Name:  姓名: Name:				
# 如以隊伍方式參加,請由團體/東區醫院部門代表統籌收集所有所屬成員的報名表後,並填妥步行團體成員名單(名單可於「東區醫院日2016」網站下載),一併交回。捐款收據將由團體/東區醫院部門代表代為分發。 The submission should be made in one batch together with "Walkathon Team Member List" (The list can be downloaded from the webpage of PYNEH Day 2016) by Team Leader or PYNEH Department Representative. The receipt(s) would be sent to the Team Leader / PYNEH Department Representative for distribution.				
I would like to join the individual category of charity walkathon.				
姓名: Name:				
III. 捐款 Donation (只適用於未能參與慈善步行者 Only applicable to non-Walkathon participants)				
本人 / 本團體未能參加是次活動,但樂意捐款港幣 元。(註1)				
I / we <b>cannot</b> come along to the event but wish to donate HK\$in support of PYNEH Day 2016. (Note 1) 姓名 / 團體名稱: Name / Name of Organization:				
本基金或會於網站/其他途徑對善長或捐款機構作出鳴謝。如不同意,請於以下方格加上✔號。 The Trust may acknowledge donations on the website or other means. If you do not agree, please tick ✔ the box below.				
□ 我不同意 貴基金鳴謝本人的捐款。 I do not agree to have my donation acknowledged by the Trust.				
IV. 聯絡及其它資料 Contact Details and Others (註2)(Note 2) 郵寄地址: Mailing Address:				

## 2. 贊助表格Sponsorship Form

本人願意贊助上述人士參加是次籌款活動,並捐助下列之善款予「東區尤德夫 人那打素醫院慈善信託基金」。

I would like to sponsor the above person to participate in this charity activity with donations to "The PYNEH Charitable Trust" as follows:

編號 No.	費助人姓名 Name of Sponsors (議以正權填寫:列印收鍊上之姓名將與此 相同) (Please write in BLOCK letter, the name will be printed on the official receipts)	贊助金額 Amount HK\$	需要收據 <sup>硅12</sup> Receipt required <sup>Note 1,2</sup> (✓)
1.			
2.			
3.			
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7.			
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10.			
11.			
12.			
13.			
14.			
15.			
	總計 Total(港幣HK\$)		
<b>若欄位不動服</b>	第四,請另備紙張 Please use supple	mentary paper if require	ed

#### 註 Note

1: 捐款港幣100元或以上可憑收據申請稅項減免。

Donations HK\$100 or above are tax deductible with a receipt.

2: 贊助人姓名將列印在收據上,捐款收據將於活動日後一個月內以郵寄方式分批寄予個人參加者 市團體參加者的收據將寄予團體/東區醫院部門代表代為分發。建議各參加者自行備份贊助 名單,以便日後查閱及分發收據。

Name of sponsors will be printed on receipt(s). The receipt(s) would be sent out by logs within 1 month after the event. For individual category, the receipt(s) would be sent to individual participants. For team category, the receipt(s) would be sent to the team leaders / PYNEH department representatives for distribution. Please make photocopy of this form and the bank-in slip if needed.