

自動轉賬奉獻申請表 *DONATION BY DIRECT DEBIT REQUEST FORM*

奉獻滿港幣壹佰圓或以上，憑奉獻收據可獲稅務寬減。 *Donation over HK\$100 is tax deductible with official receipts.*

奉獻者資料 Donor details		捐贈資料 Donation details	
請圈出 please circle 先生 Mr / 小姐 Miss / 女士 Ms	聯絡電話 Tel	我願意支持恩光書院，每月奉獻 I would like to support Lumina College with a monthly gift of HK\$ _____, 為期至 until _____ (月/mo.) _____ (年/yr.)	
英文姓名 English Name	中文姓名 Chinese Name	其他資料 (如有) Other information / Note to Lumina College (if any)	
電郵 Email			
郵寄地址 Mailing Address			

銀行戶口每月自動轉賬授權書 *BANK MONTHLY DIRECT DEBIT AUTHORIZATION*

收款的一方 (收款人) Name of Party to be Credited (the Beneficiary)		銀行號碼 Bank No.	分行號碼 Branch No.	戶口號碼 Account No.
Lumina College Limited		004	819	773649-838
本人 (等) 的銀行及分行的名稱 My/Our Bank Name and Branch				
銀行號碼 Bank No.	分行號碼 Branch No.	本人 (等) 的戶口號碼 My/Our Account No.		
本人 (等) 在結單/存摺上所紀錄的名稱 My/Our Name(s) as recorded on Statement/Passbook		付款人名稱 (若非戶口持有人) Name of Debtor (if other than Account Holder)		
本人 (等) 在結單/存摺上所紀錄的地址 My/Our Address as recorded on Statement/Passbook				
+每月付款的限額 +Limit for Each Month (Optional)		+到期日 (日/月/年) +Expiry Date (Day / Month / Year) (Optional)		聯絡電話 Tel
+本人 (等) 的簽署 +My/Our Signature(s)				日期 Date

本人 (等) 現授權本人 (等) 的上述銀行，(根據收款人或其往來銀行及/或代理不時給予本人 (等) 銀行的指示) 自本人 (等) 的戶口內轉賬予上述收款人。惟每次金額不得超過以上指定的限額。

本人 (等) 同意本人 (等) 的銀行毋須證實該轉賬通知是否已交予本人 (等)。

如因該等轉賬而令本人 (等) 的戶口出現透支 (或令現時的透支增加)，本人 (等) 願共同及個別承擔全部責任。

本人 (等) 同意如本人 (等) 的戶口並無足夠款項支付該等授權轉賬，本人 (等) 的銀行有權不予轉賬，且銀行可收取慣常的收費，並可隨時以一星期書面通知取消本授權書。

本授權書將繼續生效直至另行通知為止或直至上列到期日為止 (以兩者中最早的日期為準)。本人 (等) 同意如本人 (等) 已設立的銀行戶口每月自動轉賬授權書的戶口連續三十個月內未有根據本授權書而作出過賬的紀錄，本人 (等) 的銀行保留權利取消本直接付款安排而毋須另行通知本人 (等)，即使本授權書並未到期或未有註明授權到期日。

本人 (等) 同意，本人 (等) 取消或更改本授權書的任何通知，須於取消/更改生效日最少兩個工作天之前交予本人 (等) 的銀行。

I/We hereby authorize my/our above named Bank to effect transfers from my/our account to that of the named beneficiary in accordance with such instructions as my/our Bank may receive from the beneficiary and/or its banker and/or its banker's correspondent from time to time provided always that the amount of any one such transfer shall not exceed the limit indicated on this form.

I/We agree that my/our Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our account which may arise as a result of any such transfer(s).

I/We agree that should there be insufficient funds in my/our account to meet any transfer hereby authorized, my/our Bank shall be entitled, in its discretion, not to effect such transfer in which event the Bank may make the usual charge and that it may cancel this authorization at any time on one week's written notice. This direct debit authorization shall have effect until further notice or until the expiry date written on this form (whichever shall occur first).

I/We agree that if no transaction is performed on my/our account under such authorization for a continuous period of 30 months, my/our Bank reserves the right to cancel the direct debit arrangement without prior notice to me/us, even though the authorization has not expired or there is no expiry date for the authorization.

I/We agree that any notice of cancellation or variation of this authorization which I/we may give to my/our Bank shall be given at least two working days prior to the date on which such cancellation/variation is to take effect.

僅供官方使用 For official use only

銀行專用 For bank use	簽名核實 Signature(s) verified by

+附註:

- 如貴戶付款的數額每次不同，則請將最高者定為每次付款的最高限額。
- 如「每月付款的限額」一欄未有填上，付款銀行會將轉賬限額定為「不設上限」。
- 授權書將於「到期日」一欄中所填寫的日期自動撤銷。如貴戶意欲直接授權書無限期有效 (或直至貴戶撤銷為止)，則請將該欄留空。
- 請保證貴戶在此授權書內的簽名，與銀行戶口所簽者完全相同。

+ Notes:

- If the amount of your payments are likely to vary each time, set the "Limit for Each Month" at the maximum amount you would expect to pay at any one time.
- If "Limit for Each Month" is not specified, the debtor's bank will set the limit as unlimited.
- This Direct Debit Authorization will be cancelled automatically on the date included in the box marked "Expiry Date." If you wish the Direct Debit Authorization to have effect indefinitely (or until cancelled by you), please leave the box blank.
- Please ensure that you sign the form in the usual way that you would sign on your bank account.