

請支持我們...

Support us...

Your support enables us to provide quality service and information on sexual and reproductive health to the people of Hong Kong. We welcome you to join us as a volunteer or donor. Please complete this form and send it to the Administration Department, FPAHK, 10/F Southorn Centre, 130 Hennessy Road, Wan Chai, Hong Kong (or fax to us at 2834-6767 to obtain an application form for volunteer services).

為香港市民提供優質的性與生殖健康服務及資訊，我們需要你的支持。歡迎加入我們的行列，成為家計會義工，或透過財政資助支持我們的工作。請填妥下列表格寄交香港灣仔軒尼詩道 130 號修頓中心十樓家計會行政部（或傳真至 2834-6767 索取義工申請表）。

To : The Family Planning Association of Hong Kong

致：香港家庭計劃指導會

Please tick as appropriate.

請在適當 內加上 號。

I would like to

我希望

- | | |
|--|---|
| <input type="checkbox"/> be a volunteer of the Association's
成為家計會義工，加入
(Please send me an application form)
(請寄義工申請表格給我) | <input type="checkbox"/> Red Face No More (sexuality education youth volunteer team)
面不紅研究社 (青年性教育義工組) |
| | <input type="checkbox"/> Peer Counselling Team
朋輩輔導義工組 |
| | <input type="checkbox"/> Women's Club Volunteers
婦女會義工 |

donate HK\$ _____ to the Association

捐款港幣 _____ (元)

(Enclosed a crossed cheque payable to
"The Family Planning Association of Hong Kong")
(附上劃線支票抬頭「香港家庭計劃指導會」乙張)



Name (Mr/Mrs/Ms*) 姓名 (先生 / 太太 / 女士*)	(English 英文)	(Chinese 中文)
Address 地址		
Contact Tel. No. 聯絡電話	Email Address 電郵地址	
Signature 簽名	Date 日期	

* Please delete as appropriate 請刪去不適用者

The personal information collected will be treated as strictly confidential and will be used only for receipting and other communication with you. You have the right to access your data and make correction upon request.

所有收集的個人資料將保密處理，只用作寄發收據及與你通訊。你可隨時要求查閱及更正資料。