

(Prescribed Foreign University under Section 3503 of the Canadian Income Tax Regulations)
(Donation made by Canadian donors can be claimed against taxable income)

DONATION FORM

Donor Particulars

<input type="checkbox"/> Personal Donation	
Name (Dr. /Mr. /Ms. /Mrs.)	_____
<input type="checkbox"/> Corporate Donation	
Company / Organization Name	_____
Contact Person (Dr. /Mr. /Ms. /Mrs.)	_____
Phone No.	_____ Fax No. _____
Email	_____
Mailing Address	_____
Name on Receipt	_____
<input type="checkbox"/> The donor wishes to be reported as anonymous.	

For CUHK Alumni Only

Graduation Year _____	Major _____
College/ Graduate School _____	

Donation Amount

I would like to make a/an			
<input type="checkbox"/> One-off	<input type="checkbox"/> Monthly	<input type="checkbox"/> Annual	<input type="checkbox"/> Others (Please specify: _____)
donation of			
<input type="checkbox"/> C\$100	<input type="checkbox"/> C\$1,000	<input type="checkbox"/> C\$5,000	<input type="checkbox"/> Others (Please specify: <u>C\$</u> _____)
to support			
<input type="checkbox"/> CUHK General Development Fund			
<input type="checkbox"/> CUHK Alumni Torch Fund			
<input type="checkbox"/> Others (please specify) _____			
A Canadian tax deductible receipt will be sent to your mailing address.			

Donation Method

<input type="checkbox"/> By credit card * (Visa / Master only)	
Cardholder's Name _____	Signature _____
Card Number _____ - _____ - _____	Expiry Date _____ (MM/YY)
* Note: The Chinese University of Hong Kong will process the donation by credit card in Hong Kong dollars while the donation receipt will be denominated in Canadian dollars.	
<input type="checkbox"/> By cheque (Payable to "The Chinese University of Hong Kong") Cheque Number _____	
Please send a cheque with this donation form to:	
Office of Institutional Advancement Room LG2, LG/F., University Administration Building, The Chinese University of Hong Kong, Shatin, New Territories, Hong Kong SAR	
For credit card donation, please fax this donation form to (852) 3942-0976 or mail it to our office.	

I do not wish to be contacted by the Office of Institutional Advancement for direct marketing purposes relating to solicitation of donations and/or promotion of activities of the University.

For more details on our personal data policy, please visit our website at www.cuhk.edu.hk/oia/pdpao

Signature: _____

Date: _____