

A Pledge of Support to Dr Jenny C C Chung Education Fund

Dear alumni and friends of the Department,

We sincerely hope that Dr Chung's resolute spirit will be able to inspire the next generation with the establishment of the "Dr Jenny C C Chung Education Fund". This fund will be used to support Occupational Therapy student educational activities. Your generous donation, large or small, would be appreciated by generations of students to come.

Thank you.

Prof. Gabriel Ng
Chair Professor and Head
Department of Rehabilitation Sciences

CONFIRMATION OF DONATION

Name 姓名: _____ (English) _____ (中文)
Company 公司: _____ Position 職銜: _____
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Address 地址: _____

- I/My company* would like to make a donation of HK\$ _____ to ***Dr Jenny C C Chung Education Fund***. (If you pay by cheque, please make payable to "***The Hong Kong Polytechnic University***".)
- I/My company* would like to pledge a donation of HK\$ _____ to ***Dr Jenny C C Chung Education Fund***. (Our Department will contact you regarding the donation.)

Please send the cheque together with this form to:

*Ms Rosita Tam
Department of Rehabilitation Sciences
The Hong Kong Polytechnic University
Hung Hom, Kowloon, Hong Kong
Tel: (852) 2766 6719 Fax: (852) 2330 8656
E-mail: rsdept@polyu.edu.hk*

- I/My Company acknowledge and agree that if eligible, PolyU will apply for a grant that matches this donation from the University Grants Committee, by submitting details of my/our* donation and that I/My Company* have no objection to the disclosure of my name/company name*, purpose and details of my/our* donation to the University Grants Committee.

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Remarks : Donations of HK\$100 or above are tax deductible with official receipts which will be mailed out individually. (備註：捐款港幣一百元或以上可憑收據申請減免稅項。收據將另行寄出。)

Thank you for your generous contribution to Dr Jenny C C Chung Education Fund.

A Pledge of Support to Prof. Alan S. F. Tam Memorial Fund

Dear alumni and friends of the Department,

We sincerely hope that Prof. Tam's resolute spirit will be able to inspire the next generation with the establishment of the "Prof. Alan S. F. Tam Memorial Fund". This fund will be used to support Occupational Therapy student educational activities. Your generous donation, large or small, would be appreciated by generations of students to come.

Thank you.

Prof. Gabriel Ng
Chair Professor and Head
Department of Rehabilitation Sciences

CONFIRMATION OF DONATION

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Company 公司: _____ Position 職銜: _____
Tel 聯絡電話: _____ (Office 公司) _____ (Mobile 手提) Email 電郵: _____
Address 地址: _____

- I/My company* would like to make a donation of HK\$ _____ to **Prof. Alan S.F. Tam Memorial Fund**.
(If you pay by cheque, please make payable to "The Hong Kong Polytechnic University".)
- I/My company* would like to pledge a donation of HK\$ _____ to **Prof. Alan S.F. Tam Memorial Fund**. (Our Department will contact you regarding the donation.)

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*Ms Rosita Tam
Department of Rehabilitation Sciences
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Hung Hom, Kowloon, Hong Kong
Tel: (852) 2766 6719 Fax: (852) 2330 8656
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Thank you for your generous contribution to Prof. Alan S.F. Tam Memorial Fund

A Pledge of Support to Dr. Lee Sai-wing Memorial Fund

Dear alumni and friends of the Department,

We sincerely hope that Dr. Lee's resolute spirit will be able to inspire the next generation with the establishment of the "Dr. Lee Sai-wing Memorial Fund". This fund will be used to support Physiotherapy student educational activities. Your generous donation, large or small, would be appreciated by generations of students to come.

Thank you.

Prof. Gabriel Ng
Chair Professor and Head
Department of Rehabilitation Sciences

CONFIRMATION OF DONATION

Name 姓名: _____ (English) _____ (中文)

Company 公司: _____ Position 職銜: _____

Tel 聯絡電話: _____ (Office 公司) _____ (Mobile 手提) Email 電郵: _____

Address 地址: _____

- I/My company* would like to make a donation of HK\$ _____ to **Dr. Lee Sai-wing Memorial Fund**. (If you pay by cheque, please make payable to "**The Hong Kong Polytechnic University**".)
- I/My company* would like to pledge a donation of HK\$ _____ to **Dr. Lee Sai-wing Memorial Fund**. (Our Department will contact you regarding the donation.)

Please send the cheque together with this form to:

*Ms Candy Choy
Department of Rehabilitation Sciences
The Hong Kong Polytechnic University
Hung Hom, Kowloon, Hong Kong
Tel: (852) 2766 5399 Fax: (852) 2330 8656
E-mail: rsdept@polyu.edu.hk*

- I/My Company acknowledge and agree that if eligible, PolyU will apply for a grant that matches this donation from the University Grants Committee, by submitting details of my/our* donation and that I/My Company* have no objection to the disclosure of my name/company name*, purpose and details of my/our* donation to the University Grants Committee.

Signature of Donor: _____ Date: _____

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- I/My Company* wish to remain anonymous in donor listings, if any. (Please tick if applicable)

Remarks : Donations of HK\$100 or above are tax deductible with official receipts which will be mailed out individually. (備註：捐款港幣一百元或以上可憑收據申請減免稅項。收據將另行寄出。)

Thank you for your generous contribution to Dr. Lee Sai-wing Memorial Fund