



New Sight
Restoring Sight. Changing Lives.

GIVING FORM

Vision: A world where no-one is needlessly blind

I (we) give ☐ HK\$ _____ payable as a one-off donation

☐ HK\$ _____ payable as a monthly donation

DONOR DETAILS

Name: _____

Address: _____

Phone: _____

Email: _____

DONATION METHODS

☐ **Cheque** : HK\$ _____

Please post the donation form with the cheque payable to **"New Sight Eye Care Limited"**:
New Sight Eye Care, Unit 19, 7/F, Chevalier Commercial Centre, 8 Wang Hoi Road, Kowloon Bay

☐ **Direct Deposit** : HK\$ _____ to HSBC a/c '848-587531-838'

Please send the donation form with a copy of the deposit slip via:

- Online: www.newsightcongo.com/donate/hk or

- Email: hkdonations@newsightcongo.com or

- Post: New Sight Eye Care, Unit 19, 7/F, Chevalier Commercial Centre, 8 Wang Hoi Road,
Kowloon Bay, Kowloon, Hong Kong

☐ **Credit Card** : www.newsightcongo.com/donate/hk

(New Sight pays 2.9-3.4% processing fee)

☐ **Autopay** : Please email us for further info at info@newsightcongo.com

☐ I (we) wish to receive tax receipts (to be sent 6-8 weeks upon receipt of the donation)

☐ I (we) do not wish to receive updates from New Sight.

We commit to complying with the Personal Data (Privacy) Ordinance.

Our privacy policy can be found on www.newsightcongo.com/privacy.



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