



## To Teachers with Love - Dr T Design Competition cum Fundraising Campaign

### STUDENT ENROLMENT FORM

Under the government's 6th Matching Grant Scheme, net proceeds generated from the competition will be doubled when successfully matched and will contribute to the "Appreciate Teachers" Student Development Fund.

Please check the appropriate boxes

Name of Participant: \_\_\_\_\_

Name of Parent: \_\_\_\_\_ (applicable to Kindergarten category only for parent-child activity)

Name of School: \_\_\_\_\_ Class: \_\_\_\_\_

I **will** participate in the "To Teachers with Love - Dr T Design Competition"

I **will not** participate in the "To Teachers with Love - Dr T Design Competition", but I would like to support it by making a donation of HK\$\_\_\_\_\_.

Participants are encouraged to invite friends and relatives to support the campaign and further promulgate the message of "To Teachers with Love" by using the attached sponsor form. All donations will support the establishment of the "Appreciate Teachers" Student Development Fund that will help prepare HKIEd students to become competent teachers and professionals.

1) Dr Small T 12cm/ 4.75in (H)	Donation amount <sup>#</sup> (HK\$100 donation for each Dr Small T is suggested to echo "100% support for education") HK\$ _____	HK\$50 for one Dr Small T for competition HK\$50 x _____ piece(s)	Sub-total HK\$ _____
2) Extra Donation <sup>#</sup>			HK\$ _____
<b>TOTAL</b>			<b>HK\$ _____</b>

<sup>#</sup>An official receipt will be issued for any donation of HK\$100 or above for tax deduction purposes.

I wish to remain anonymous in all donor listings.

Payment method:

Payment should be made with a crossed cheque payable to "The Hong Kong Institute of Education", with the participant's name and contact phone number written on the back.

I agree the Institute to submit an application for the Government's Matching Grant Scheme with the donation.

Signature of Parent: \_\_\_\_\_

Date: \_\_\_\_\_

Enquiry: Alumni Affairs & Development Office Tel: 2948 6049 (Miss Man)/ 2948 6061 (Miss Lau) E-mail: [aado@ied.edu.hk](mailto:aado@ied.edu.hk)

The Hong Kong Institute of Education Alumni Affairs and Development Office (HKIEd AADO) will ensure that the data provided by you are treated and kept strictly confidential, in accordance with the relevant provisions of the Personal Data (Privacy) Ordinance. The data provided by you may be shared with the appropriate parties and personnel of or in relation to the Institute for administration, communication and other related purposes. HKIEd AADO will not disclose your personal information to any external parties unless otherwise stated or with your prior consent or it is required to do so by law.

You may opt-out from receiving our information materials at any time by sending your personal information (including your name and email) to Alumni Affairs and Development Office (email: [aado@ied.edu.hk](mailto:aado@ied.edu.hk)).

## To Teachers with Love - Dr T Design Competition cum Fundraising Campaign SPONSOR FORM

### Details of Participant

Name of Participant: \_\_\_\_\_ (Chinese) \_\_\_\_\_ (English)

Name of School: \_\_\_\_\_ Class: \_\_\_\_\_

### Details of Sponsors

I agree to sponsor the above person to participate in the “To Teachers with Love – Dr T Design Competition” with a donation to HKIED to support the establishment of the “Appreciate Teachers” Student Development Fund that will help prepare HKIED students to become competent teachers and professionals.

	Name of Sponsors (in block letters)	Donation Amount (HK\$)	Request of donation receipt? (Yes/No)*	Agree HKIED to submit an application for the Government’s Matching Grant Scheme with my donation? (Yes/No)#	Signature
1.	Mr / Ms				
2.	Mr / Ms				
3.	Mr / Ms				
4.	Mr / Ms				
5.	Mr / Ms				
6.	Mr / Ms				
7.	Mr / Ms				
8.	Mr / Ms				
9.	Mr / Ms				
10.	Mr / Ms				
11.	Mr / Ms				
12.	Mr / Ms				
13.	Mr / Ms				
14.	Mr / Ms				
15.	Mr / Ms				

**Total Amount (HK\$):** \_\_\_\_\_

**Remarks:**

\*An official receipt will be issued for any donation of HK\$100 or above and distributed by the participant. Thank you for your support.

# Please specify or “Yes” will be assumed.

Please make photocopy of this form if needed.

**Payment method:**

Payment should be made with a crossed cheque payable to “The Hong Kong Institute of Education”, with the participant’s name and contact phone number written on the back.