

Naming of Antique Plate Appeal for New Nursing Home at Gordon 籌建哥頓新療養院命名善舉 - 清朝「三百六十行」手繪古董碟冠名

Thank you for participating in our Naming of Antique Plates Appeal to raise funds for the new nursing home at Gordon. You can browse through ANHF Website for more details <a href="www.anhf.org.au/antique-plates-donation-gordon">www.anhf.org.au/antique-plates-donation-gordon</a> 感謝各界人士慷慨解囊積極支持哥頓新療養院手繪古董碟冠名捐款活動, 請瀏覽網站了解更多相關信息

- \$1,000 plate and location will be randomly allocated at the Carpark Lift Lobby, Library (blue plates only for Library) or other parts of the home 捐款\$1,000澳元,您冠名的古董瓷碟將由澳華養老隨機擺放.它们将被展示在地庫大堂或圖書館(圖書館僅限青花瓷)或院舍內的其他位置
- \$3,000 Dining Rooms, Social Lounges, Leisure Corners, Entrance to the Gymnasium, Galleries at LG Lift Lobby, and Tea House 捐款\$3,000澳元,您可選擇將冠名的古董瓷碟展示在餐廳,聯誼廳,休閑廳,健身室入口,升降機大堂,茶室
- \$5,000 Galleries next to the Reception and Lobby on Ground Floor 捐款\$5,000澳元, 您可選擇將冠名的古董瓷碟展示在接待處或地下大堂畫廊中
- \$10,000 Eye-level at the Galleries next to the Reception and Lobby on Ground Floor 捐款\$10,000澳元, 您可選擇將冠名的古董瓷碟展示在接待處或地下大堂畫廊的當眼位置

SECTION 1 : Plate Details	s 古董碟冠名資料 (Don	ations of \$3,000 c	r above - Select y	our choic	e of plate	and location)		
I would like to make a donation of 捐款金額		\$						
Plate No. 手繪古董碟编号								
Location 手繪古董碟擺放區域	(e.g. A,B,C,D)							
In memory of / Donated by				You can ch	oose to be	anonymous 您可選抖	·	
(English Text AND/OR Chinese	Text) 紀念 / 捐款							
SECTION 2 : Personal De	tails 個人資料							
Title 稱謂	□ Mr 先生	☐ Mrs 太太 ☐ Ms 女士		Ms 女士	☐ Miss 小姐			
Family Name 姓氏								
First Name 名字								
Middle Name 中間名								
Home Address 住址								
	State / Territory 州	Select your state			Post Code 郵政區號			
Phone Number 電話號碼	( )	Mobile Number 手機號碼						
Payment Type  ☐ Electronic Funds Transfer	TO: Australian Nu	rsing Home Foundat	ion ( <b>BSB</b> 082-201, <b>A</b>	Account Ni	umber 580	0-328-001)		
☐ Please debit this card	☐ Master Card	☐ Visa	Other: Please type here					
	Name on Card							
	Card No.		-	-		-		
	Expiry Date	/	С	vv		-		
	Signature		1.334					
☐ Cheque	Payable to Austra	Payable to Australian Nursing Home Foundation						
☐ Money Order	Payable to Austra	Payable to Australian Nursing Home Foundation						
Name 姓名:			Signature 簽名:					
Tallic ALD:								