**South Vancouver Pacific Grace MB Church - Short Term Missions Application Form**

**南溫哥華基督教頌恩堂 -- 短期宣教申請表**

(Application form must be submitted: at least 3 months before a STM departure date;

All information provided will be kept confidential. This form will be for the sole use of the Missions Department)

(申請表必須於短宣出發日期前至少三個月交回教會;

此表格內之資料將作保密，只作差傳部紀錄用途)

All applicants for any short term missions (STM) project led by SVPGMBC must fill in an application form (including your testimony, experiences in serving Jesus, and reasons for joining this short term missions trip [section 7-2 of this form]). This form will allow the Missions Board to have the necessary information for initial screening. After the initial screening, a formal interview process of the applicant will be scheduled with the project team lead(s) and at least one Missions Board member. Once the interviews for all applicants are carried out, the Missions Board, with the input from the project lead, will decide the most appropriate candidates for the team and invitations to join the team are sent out.

凡有意參與南溫哥華基督教頌恩堂主辦的短期宣教隊伍，必需先填寫此表格（包括第7.2項的得救見證 ，事奉經驗，及參加短宣原因等）以作甄選之用。經初步篩選後，短宣隊負責人及差傳部代表將與申請者會面。之後，差傳部及短宣負責人會決定合適人選及發出加入短宣的邀請。

Upon accepted into the STM team, short termer is responsible for:

1. Participating in church-wide STM fundraising event(s) held by the Missions Board to raise awareness of the short term missions
2. Actively fund raise by self (e.g. family members, friends outside of SVPGMBC) to meet the financial needs of the Church STM budget.
3. Participating in all STM related activities (preparatory, debriefing, and sharing sessions; full time participation in the STM; side trips are not allowed)
4. Providing a written report with personal reflection to Missions Board upon completion of the STM

一旦接受成為短期宣教隊成員，其職責包括：

1. 參與差傳部舉辦的全堂性短期宣教籌款活動，以提高短期宣教意識
2. 積極籌募個人款項（可向家人或本教會以外的朋友籌募），以達至教會短宣籌款目標
3. 參與短期宣教所有相關活動（訓練準備，全程參與，匯報，分享; 不可於短宣前後附加旅行）
4. 在短期宣教完成後提交個人反思報告

This application does not guarantee the applicant to be a team member of the STM.

提交此申請表並不代表申請人自動成為短期宣教隊成員。

If there are discrepancies in the statements above and the Handbook, the Handbook will be the ultimate reference. If you have any concerns about the above responsibilities, please indicate your concerns in section 8 of the application form.

若上文與差傳手冊不符，該手冊將是最終的指引。如果您對上述職責有任何疑問，請將您的問題列明在申請表的第8項。

\* For Office Use Only 以下由教會填寫\*

○ The application has been approved 申請參加之短期宣教獲批准

○ The application has been rejected because of 申請不獲批准原因

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Authorized Signature 負責人簽署: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name 姓名:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) Date 日期:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Personal Information 個人資料

First Name 名字: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name 姓氏: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth 出生日期: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender 性別: Male男□ / Female 女□

Marital Status 婚姻狀況: Single 單身□ / Married 已婚□ / Other 其他: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Spouse 配偶姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Children 子女數目: \_\_\_\_\_\_\_\_\_

Languages Spoken能講語言: English英語 □ / Cantonese廣東話□ / Mandarin國語□ / Other其他: \_\_\_\_\_\_\_

Address 地址: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code郵區: \_\_\_\_\_\_\_\_\_\_\_

Phone 電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email 電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Career Status 就業或在學? Employed就業□ / Unemployed待業□ / Student學生□ / Other Status (please state) 其他□\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Career 職業: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Highest Grade Attended 最高學歷: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

My STM destination is短期宣教地方: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Health Information 健康狀況

Are you aware of any physical or emotional problems that may limit you during the program?

你有否任何生理或情緒問題將會影響短期宣教行程? Yes有□ / No沒有□

If YES, please explain如有請列出:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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List any serious illness(es) you have/had, along with the dates 嚴重的病症資料:

Illness 病症: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date 日期: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Health & Life Insurance 保險資料

Health Insurance Company 保險公司:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy Number 保單號碼: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Medical and/or Allergy Information 藥物或敏感資料

Please list and / or explain any medical or allergy conditions you have 如有，請列出閣下的藥物或敏感資料

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Doctor 家庭醫生: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone 電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Emergency Contact 緊急聯絡人

Contact Name聯絡人姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship 關係: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address 地址: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal code 郵區: \_\_\_\_\_\_\_\_\_\_\_

Phone 電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email 電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. References諮詢人

Pastoral Staff / Fellowship Counselor教會之牧師/傳道人/團契負責人:

Name姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position職位: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address 地址: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position職位: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address 地址: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Tell us about yourself 自我介紹

1. Date of baptism 受浸日期: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Your testimony on how you become a Christian, your experiences in serving Him and the reasons for joining this STM Trip. (\*Please write it on a separate sheet of paper) 你的得救見證，事奉的經歷及參與此短宣的理由 (\*請用另外一張紙書寫)

3. Have you been on a missions trip before? 你從前有否參加過短期宣教?

Yes有□ / No沒有□

Where 何地? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When 何時? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What Organization 什麼機構? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Areas of past ministry experiences, please state. e.g. music, children ministry, teaching, fellowship etc. 你過去在敎會中曾參與什麼崗位事奉? 例如音樂，兒童事工，教育，團契等等

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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8. Other remarks Missions Board need to be aware of that may affect the STM (eg. trips close to the time of STM, other areas of concern…)

請說明其他可能會影響到短期宣教，差傳部需要注意的事情（如短宣前後的行程...... ）

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I hereby consent the following:

I wish to join the short-term missions project organized by (church or missions agency) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ between the dates of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to (place) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I will participate in all church-wide fundraising event(s), in raising funds by self to meet the financial needs of the Church STM budget, in all STM related activities (preparatory, debriefing, and sharing sessions), in writing a report with personal reflection to Missions Board upon completion of the STM. I will obey the leaders and work as a team. I realize that travel insurance is required. In case of any accident, neither those in charge nor the church (SVPGMBC) shall be held responsible.

本人同意 :

本人申請參與\_\_\_\_\_\_\_\_\_年\_\_\_\_\_\_月\_\_\_\_\_\_日由(教會或差傳機構) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 主辦前往(地點)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 之短期宣教，願意參與全堂性籌款及個人籌款以達教會短宣籌款標目; 在短期宣教前接受全期訓練，宣教期間遵照所有規條及服從領隊之指示，與隊員同工配搭事奉，興旺福音; 短宣後滙報, 分享, 及提交個人反思報告。本人將購買旅行之安全保險，若途中遇有變更或意外，本人將不會向南溫哥華基督教頌恩堂追究責任。

Signature of Applicant 申請人簽署: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Guardian (if applicant under 19) 監護人簽署 (如申請人未滿19歲): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Guardian 監護人姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date 日期: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship with applicant 與申請人之關係: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SVPGMBC - Short Term Mission Donation Form** **南溫哥華基督教頌恩堂----短期宣教籌款表格**

Participant (first and last name) 參加者姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project/Team短宣隊: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s mailing address參加者地址: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City城市: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province省: \_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code郵區號碼: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_ Email電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Amount Received奉獻金額** | **Donor Information 奉獻者資料** |
| $ \_\_\_\_\_\_\_\_\_\_\_\_  [ ] cash現金  [ ] cheque 支票 #\_\_\_\_\_\_\_\_\_\_  Tax Receipt? 是否需要奉獻收據?  [ ] yes需要 [ ] no 不需要 | Last Name姓: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SVPGMBC Donation # 南溫哥華基督教頌恩堂徵信號碼:  [ ] Yes有: #\_\_\_\_\_\_\_\_\_  [ ] No沒有: Address地址:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City城市: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code郵區號碼: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| $ \_\_\_\_\_\_\_\_\_\_\_\_  [ ] cash現金  [ ] cheque 支票 #\_\_\_\_\_\_\_\_\_\_  Tax Receipt? 是否需要奉獻收據?  [ ] yes需要 [ ] no 不需要 | Last Name姓: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SVPGMBC Donation # 南溫哥華基督教頌恩堂徵信號碼:  [ ] Yes有: #\_\_\_\_\_\_\_\_\_  [ ] No沒有: Address地址:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City城市: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code郵區號碼: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| $ \_\_\_\_\_\_\_\_\_\_\_\_  [ ] cash現金  [ ] cheque 支票 #\_\_\_\_\_\_\_\_\_\_  Tax Receipt? 是否需要奉獻收據?  [ ] yes需要 [ ] no 不需要 | Last Name姓: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SVPGMBC Donation # 南溫哥華基督教頌恩堂徵信號碼:  [ ] Yes有: #\_\_\_\_\_\_\_\_\_  [ ] No沒有: Address地址:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City城市: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code郵區號碼: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| $ \_\_\_\_\_\_\_\_\_\_\_\_  [ ] cash現金  [ ] cheque 支票 #\_\_\_\_\_\_\_\_\_\_  Tax Receipt? 是否需要奉獻收據?  [ ] yes需要 [ ] no 不需要 | Last Name姓: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SVPGMBC Donation # 南溫哥華基督教頌恩堂徵信號碼:  [ ] Yes有: #\_\_\_\_\_\_\_\_\_  [ ] No沒有: Address地址:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City城市: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code郵區號碼: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone電話: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email電郵: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

\*Tax Receipts are only available for donations over $20. Please make cheques payable to “SVPGMBC”

$20以上可發奉獻收據。 支票抬頭請寫“SVPGMBC” 。

\*All donations will go to SVPGMBC Missions Fund. 所得奉獻將用於南溫哥華基督教頌恩堂差傳事工之用。