

## 誠邀 貴校學生參加《瞳見光明講座計劃》

# 瞳見光明講座計劃

眼疾是全球最受忽略的殘疾，護瞳行動的講座教育下一代保護眼睛，關注眼疾在全球為患者帶來的影響。

### 為何要了解眼疾？

- 全球有9,100萬兒童視力受損，但在大部份情況下，幾乎一半是可以預防或治療
- 兒童大部份的早期學習是通過視覺進行的，視力受損會影響成長發展
- 兒童視力障礙的影響會延伸至人生的各個階段

### 講座內容：

- 根據學校和機構的需要和課程設計
- 內容可包括眼健康知識分享、全球眼疾情況、故事實例、國際非牟利組織的工作情況，及互動環節等

### 講座形式：

- 每節講座大約1小時，到校或網上形式，可以廣東話/ 英文/ 普通話舉行，適合幼稚園至中學生參加



## Invitation to participate “Eye Health School Talk”:

# Eye Health School Talk

Eye disease is the most neglected disability in the world, and it is imperative to educate the next generation to protect their eyes.

### Why learn about eye diseases?

- 91 million children with vision loss globally, yet in many cases, almost half can be prevented or treated
- Evidence shows that a large portion of a child's early learning is through vision
- Effects of childhood visual impairment stretch far into later stages of life

### Content:

- Content will be provided according to the needs and curriculum design of schools and institutions
- Content can include eye health knowledge, global eye disease situation, real life stories, the work of a global NGO and interactive activities, etc.

### Format:

- Each session is about 1 hour, on-campus or online, and can be conducted in Cantonese/English/Putonghua, suitable for Kindergarten to Secondary School students



## 《瞳見光明講座計劃》報名表

### “Eye Health School Talk” Application Form

|   |   |
|---|---|
| <b>申請資料 Applicant Details</b>   |   |
| 學校名稱:<br>School Name:   |   |
| 學校地址:<br>School Address:  |   |
| 學校電話:<br>School Tel. No.:   | 聯絡人姓名:<br>Contact Person Name:  |
| 學校傳真:<br>School Fax. No.:   | 聯絡人職銜:<br>Contact Person Title:   |
| 電郵地址:<br>Email Address:   | 聯絡人手提電話:<br>Contact Person Mobile No.:  |
| <b>講座細節 Talk Details</b>  |   |
| 建議講座日期 (第一選擇):<br>Preferred Date (1 <sup>st</sup> choice):  | 建議講座時間 (第一選擇):<br>Preferred Time (2 <sup>nd</sup> choice):  |
| 建議講座日期 (第二選擇):<br>Preferred Date (1 <sup>st</sup> choice):  | 建議講座時間 (第二選擇):<br>Preferred Time (2 <sup>nd</sup> choice):  |
| 學生年級:<br>Grade(s) at school:  | 學生數目:<br>No. of Students:   |
| 講座形式 Format:<br><input type="checkbox"/> 到校 On Campus <input type="checkbox"/> 網上 Online  | 講座語言 Language:<br><input type="checkbox"/> 廣東話 Cantonese <input type="checkbox"/> 英文 English <input type="checkbox"/> 普通話 Putonghua |
| 補充資料 / 其他需求 (如適用) Supplementary Information / Other Request (if applicable):  |   |
| <b>付款方式 Payment Methods:</b> (請於講座前不少於一星期繳交所需費用 <i>Must pay in advance 1 week prior to the scheduled talk</i> )   |   |
| <b>講座費用: HK\$500 (每節) Fee: HK\$500 (per session)</b>  |   |
| 劃線支票 CHEQUE<br>支票收款人: 護瞳行動 (香港) 有限公司, 或 The Fred Hollows Foundation (HK) Limited。請將支票連同捐款者資料(姓名、電郵、電話、地址) 郵寄到「香港特別行政區九龍太子彌敦道 794-802 號協成行太子中心 10 樓 1005 室 護瞳行動捐款服務部」。<br>Please make a cheque payable to The Fred Hollows Foundation (HK) Limited and send it together with your name, phone, email and mailing address to Room 1005, 10/F, OfficePlus @Prince Edward, 794-802 Nathan Road, Hong Kong SAR.  |   |
| 銀行轉帳 BANK DIRECT TRANSFER<br>請將費用直接存入護瞳行動的銀行戶口 Please make a deposit to the following bank account:<br><ul style="list-style-type: none"> <li>• 匯豐銀行 HSBC 848-423240-001</li> <li>• 戶口名稱 Account Name : 護瞳行動 (香港) 有限公司   The Fred Hollows Foundation (HK) Limited</li> </ul>  |   |
| <b>遞交表格 Application:</b>  |   |
| 請在建議講座日期前最少一個月, 將此報名表電郵 <a href="mailto:hkinfo@hollows.org">hkinfo@hollows.org</a> 或傳真至 37530523 安排。如有查詢, 請致電 36146240。<br>遞交表格, 表示 貴校同意本會使用有關講座活動資料, 作本會的宣傳及教育之用。<br>是次活動所收集的個人資料, 只作本活動的通訊之用。有關本會的私隱政策, 請瀏覽 <a href="https://www.hollows.org/hk">https://www.hollows.org/hk</a><br>Please submit this application form via email to <a href="mailto:hkinfo@hollows.org">hkinfo@hollows.org</a> or fax at 37530523 at least a month before your preferred date of the talk. FHF HK will reply within 7 working days. <b>Please contact 36146240 if any questions.</b><br>By submitting this form, your school agrees for FHF HK to use the information about this talk for promotion and education use.<br>The personal data collected in this event will only be used for the communication of this event. For our privacy policy, please visit <a href="https://www.hollows.org/hk">https://www.hollows.org/hk</a> |   |
| 我希望日後收到護瞳行動的活動訊息。I wish to receive activities information from The Fred Hollows Foundation.<br><input type="checkbox"/> 願意 Yes <input type="checkbox"/> 不願意 No  |   |