

Request Form for Booklets on Prevention and Screening of Breast and Colorectal Cancers

索取預防及篩查乳癌和大腸癌小冊子的表格

Please submit the completed request form to **Non-Communicable Disease Division of the Department of Health** via post or fax.

請把填妥的索取表格以郵寄或傳真方式交回**衛生署非傳染病部**。

Address 地址	Tel No. 電話號碼	Fax No. 傳真號碼
Non-Communicable Disease Division, Department of Health 18/F, Wu Chung House, 213 Queen's Road East, Wan Chai, HK 香港灣仔皇后大道東213號胡忠大廈18樓 衛生署非傳染病部	2961 8972	2575 4110

Notes to Applicants 申請者須知：

1. The Department of Health reserves the right to decide on the quantity of booklets provided.
衛生署保留決定所提供小冊子數量的權利。
2. No duplication or extraction is allowed for any materials provided in the booklets without authorisation.
未經授權，不可複製或擷取小冊子內容。
3. All applied booklets can only be used for non-profit making purpose.
所有小冊子只可作非牟利用途。
4. Should you have any enquiries, please contact us at 2961 8972.
如有查詢，請致電 2961 8972 與我們聯絡。

Booklet 小冊子	Language 語言	Requested Quantity 所需數量
<i># The booklets are also available for download at http://www.chp.gov.hk/en/guideline/466/34.html</i> <i># 小冊子也可於網站 http://www.chp.gov.hk/tc/guideline/466/34.html 下載。</i>		
Prevention and Screening for Breast Cancer Information for women and their families 乳癌預防及篩查 給婦女及其家人的資訊	English 英文	
	Chinese 中文	
Prevention and Screening for Colorectal Cancer 大腸癌預防及篩查	English 英文	
	Chinese 中文	

Name of Contact Person

聯絡人姓名 _____

Fax No. 傳真號碼* _____

Organisation 機構 _____

Signature 簽署 _____

Tel No. 電話號碼 _____

Date 日期 _____

E-mail 電郵地址* _____

*Please fill in if applicable 請於適用時填寫

Delivery Address 送遞地址 _____

Note: The Department of Health will inform you of the arrangement and date of delivery upon receipt of your request form.
註：衛生署收到你的索取表格後，會通知你送遞小冊子的安排及日期。

香港灣仔皇后大道東213號胡忠大廈18樓
 18/F, Wu Chung House, 213 Queen's Road East, Wan Chai, Hong Kong