

The Hong Kong Institute of Chartered Secretaries  
Membership Activity Enrolment Form



To : Membership Section, HKICS  
Email : member@hkics.org.hk  
Fax : 2530 4677

**#IMPORTANT NOTE:** Please complete the MANDATORY fields, without complete information the enrolment will NOT be processed.

#Activity Title : \_\_\_\_\_  
#Activity Date : \_\_\_\_\_

**Participant 1**       Member/Graduate/Student (HK\$ \_\_\_\_\_)       Non-member (HK\$ \_\_\_\_\_)  
Name : (Dr/ Mr/ Mrs/ Ms/ Miss) \_\_\_\_\_  
Membership/Graduate/Student Number : \_\_\_\_\_ Mobile No : \_\_\_\_\_  
Email Address : \_\_\_\_\_

**Participant 2**       Member/Graduate/Student (HK\$ \_\_\_\_\_)       Non-member (HK\$ \_\_\_\_\_)  
Name : (Dr/ Mr/ Mrs/ Ms/ Miss) \_\_\_\_\_  
Membership/Graduate/Student Number : \_\_\_\_\_ Mobile No : \_\_\_\_\_  
Email Address : \_\_\_\_\_

I/We have read, understood and fully agreed to the 'Terms and Conditions', 'Declaration', 'Assumption of Risks and Disclaimer' and 'Statement on Collection of Personal Data'.

# Signature of Member/Graduate/Student : \_\_\_\_\_ Date : \_\_\_\_\_  
# Name of Member/Graduate/Student : \_\_\_\_\_

**Payment Method** (please tick as appropriate)

Proper form completion and full payment made required prior to HKICS acceptance and arrangement of requested matters.

- By EPS/ UnionPay - in person  
 By cheque - in person/by post (Payable to 'HKICS'. Post-dated cheque will NOT be accepted)

Bank: \_\_\_\_\_ Cheque No.: \_\_\_\_\_  
(Specify at back '[Description]' and '[Membership/Student No.]')

- By Credit Card - in person/by email/by post (I, as the cardholder, authorise HKICS to debit the payment from my credit card) Please fill in the below information if by email/by post.  
 Chartered Secretaries American Express       VISA       MasterCard

Name of Cardholder (Block letters): \_\_\_\_\_

Credit Card no: \_\_\_\_\_ Card Expiry date: \_\_\_\_MM \_\_\_\_YY

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(As with credit card)

If the cardholder and the applicant are not the same person, please explain basis for third party payments (e.g. employer payment).  
Applicant to bear consequences for unauthorised third party payments: \_\_\_\_\_  
To facilitate payment, credit cards should not expire in less than one month.

Office Use Only	Invoice No.: _____	Sign up <input type="checkbox"/>	Date: _____
	Credit Card authorisation code: _____	Email <input type="checkbox"/>	Date: _____

## Terms and Conditions

1. Enrolment will be confirmed upon receipt of full payment on a first-come, first-served basis. Priority enrolment will be given to HKICS member/graduate/student. Non-member's enrolment will only be considered when enrolling with a HKICS member/graduate/student.
2. If you do not receive an acknowledgement and/or confirmation email five days after your enrolment and/or return of reply slip, please contact Membership Section, Ms Vicky Lui at (852) 2830 6088 or email [member@hkics.org.hk](mailto:member@hkics.org.hk).
3. Refund is not available, but substitute participant (HKICS member/graduate/student only) is allowed. Please notify us of the replacement at least five working days in advance.
4. The Institute reserves the right to change the event details (e.g. Guest of Honour, date, time, venue) as deemed necessary. In case of adverse weather conditions (e.g. black rainstorm warning signal or typhoon signal No. 8 or above is hoisted within three hours before the event), participants will be notified of event changes by email.
5. There may be photography, filming and sound recording at HKICS events. By participating in this HKICS event, you consent to be photographed, filmed or sound recorded, and consent to your images and sounds (which may include your identifiable images and sounds) being used by HKICS in the future promotional materials. If you do not agree that your identifiable images and sounds which may have taken at this event be used, please contact HKICS so that necessary arrangements may be made.

## Declaration

1. I declare that I do not suffer from any illness/disability that renders me unfit to participate in the captioned activity. I undertake to immediately notify HKICS if, for any reason, my health subsequently renders me or may render me unfit to participate in the captioned activity. I fully agree and accept that HKICS will then consider whether I should, in the interest of safety and/or the safety of the other participants, continue to be allowed to further/continue to participate and that the decision of HKICS will be final.
2. In the event where trainer(s) are in place, I agree to follow the trainer(s)' instructions which may be a verbal, visual, physical or demonstrative form of communication and ask for further clarification of any ambiguous and/or inaudible instructions. I understand that I can be asked to leave the event venue immediately if considered to be deliberately ignoring the instructions from the trainer(s).

## Assumption of Risks and Disclaimer

1. As a participant in the captioned event, I accept that I may be exposing myself to risks of harm due to the hazards inherent of the captioned event.
2. **DISCLAIMER**  
The Hong Kong Institute of Chartered Secretaries (HKICS), its directors and officers shall not be liable for all claims, suits and actions of every name, kind and description brought for, or on account of, any loss, personal injuries, or property damage that a participant might suffer during the participation in the captioned event.

## Statement on Collection of Personal Data

1. Your supply of personal data to HKICS is on a voluntary basis.
2. The information provided by you to HKICS will be used for administration and management; membership admission, registration maintenance and administration; enforcement of members' compliance with the provisions of the Charter and Byelaws of ICSA and the Articles of Association of HKICS for the time being in force and related matters; communications; assessment of qualifications and experience; examinations; continuing professional development; surveys, analysis, research and development; promotion of the profession, ICSA and HKICS; and marketing and provision of services and benefits and organising activities to members, graduates and students.
3. The information provided by you herein may be made available to the related companies or associates, group sister associations, agents, contractors, business associates or service providers of the HKICS or other professional bodies or government bodies or regulators, as may be necessary for any of the above purposes.
4. Apart from the purposes stated above, your personal information will not be transferred to any other parties, unless such parties are authorised by law and request the information.
5. Under the Personal Data (Privacy) Ordinance, you have a right to request access to and correction of your personal data. Such requests may be made in writing to our Data Protection Officer at 3rd Floor, Hong Kong Diamond Exchange Building, 8 Duddell Street, Central, Hong Kong or by email to us at [privacyofficer@hkics.org.hk](mailto:privacyofficer@hkics.org.hk).