



The Hong Kong Institute of Bankers

Membership New Application Form 2017

Ordinary Member

CFMP™ Macau
(Batch 8) IFS

Please complete the form in BLOCK LETTERS

Batch No. :

* Required field MUST BE FILLED IN for processing the application

SECTION A: PERSONAL PARTICULARS

Title: Mr Mrs Miss Dr Prof Ms Membership No.*:

Name (as shown on ID Card / Passport)*:

Chinese Name: Preferred Name:

ID Card/Passport No.*: Date of Birth (dd/mm/yyyy) *: / /

Residential Address: Correspondence Address:
 Residential
 Office
(Please put a "✓" in the appropriate box)

Office Address:

Residential Telephone No.: Fax No.:

Office Telephone No.: Fax No.:

Mobile No. (Hong Kong / Macau)*: Mobile (China):

E-mail (Primary): E-mail (Secondary):

SECTION B: EMPLOYMENT PARTICULARS

Name of Organisation:

Department: Job Title:

Other employment information (Please put a ✓ in the appropriate box)

Industry	<input type="checkbox"/> Accounting / Audit	<input type="checkbox"/> Banking	<input type="checkbox"/> Commercial / Industrial	<input type="checkbox"/> Education
	<input type="checkbox"/> Government / Regulator	<input type="checkbox"/> Insurance	<input type="checkbox"/> Legal Practice	
	<input type="checkbox"/> Securities and other financial institutions	<input type="checkbox"/> Others: _____		
Position	<input type="checkbox"/> CEO/Director	<input type="checkbox"/> Senior Management	<input type="checkbox"/> Middle Management	
	<input type="checkbox"/> Officer	<input type="checkbox"/> Clerical		
Division (for Banking Industry only)	<input type="checkbox"/> Asset Management / Private Banking		<input type="checkbox"/> Commercial / Corporate Banking	
	<input type="checkbox"/> Compliance & Risk Management	<input type="checkbox"/> General Management	<input type="checkbox"/> Investment Banking	
	<input type="checkbox"/> Operations & Support	<input type="checkbox"/> Retail Banking	<input type="checkbox"/> Treasury	

SECTION C: ACADEMIC/ PROFESSIONAL QUALIFICATIONS (HIGHEST QUALIFICATION ONLY)

School/College/Professional Institution/University	Qualification obtained	Year of Completion

SECTION D: MY STUDY PLAN

To enable us to send relevant information to you, please choose the Qualifications/Training Activities you wish to pursue:

- Certified Banker (CB)**
- Certified Banker (Stage II)**
- Certified Banker (Stage I)**
- Certified Financial Management Planner (CFMP™)**
- Courses/ Seminars/ Luncheon & Industry Update**

SECTION E: SOURCE OF INFORMATION

From which of the following sources do you know our Institute?

- HKIB's website HR/Training Department Homepage of Education and Manpower Bureau
- Newspaper/Magazine Colleagues/Classmates/Friends Information Session/Exhibition
- Labour Department Others, please specify _____

SECTION F: PAYMENT METHOD (WAIVED FOR NEW MEMBERS - CFMP™ IN-HOUSE)

<input type="checkbox"/> Cash (for applications submitted over the Institute's counter only)	<input type="checkbox"/> PPS PPS Merchant Code: 9657 PPS Payment no.: _____ PPS Payment Reference no.: _____ Amount: _____
<input type="checkbox"/> A cheque / e-Cheque made payable to "The Hong Kong Institute of Bankers" (cheque no. _____) For e-Cheque, please state "2017 Ordinary Membership Application" under 'Remarks' and email together with the completed application form to membership@hkib.org	<input type="checkbox"/> Credit Card <input type="checkbox"/> Visa <input type="checkbox"/> Master Card Amount: _____ Credit card no. : _____ - _____ - _____ - _____ Name of Cardholder: _____ (Same as the Credit Card Name) Expiry Date: ____ / ____ Signature: _____

FEES SCHEDULE

First Registration Fee	HK\$200	
Membership Period	Annual (Jan – Dec 2017)	Semi-annual (Jul – Dec 2017)
Ordinary Member	HK\$1,000	HK\$500

NOTES FOR MEMBERSHIP APPLICATION

- All fees (including the Membership Re-registration Fee and the Subscription Fee) paid are non-refundable and non-transferable.
- Current members who fail to pay the membership subscription fee on or before **31st January of each calendar year** will be treated as default members and the reinstatement policy will thereby be applied.
- Default members seeking reinstatement of membership are required to pay the membership subscription for the current year plus the Re-registration Fee (HK\$500).
- Default Professional Members seeking reinstatement of their membership may have an option to reinstate for life membership but the Re-registration fee still applies.
- Members can choose to send their Membership Application Form to the Institute:
 - in person;
 - by fax (should you choose to fax the form, please do not mail it to the Institute to avoid duplication);
 - by post or
 - by e-mail: membership@hkib.org
- The information given and personal data collected will be used for the purpose of administration and communication by the Institute.

Acknowledgement and Declaration

- I, the undersigned, declare that the information provided in this form is true and correct and will be used for the purpose of administration and communication by The Hong Kong Institute of Bankers (HKIB).
- I understand that as a member of the HKIB, I shall be bound by the prevailing rules and regulations of the Institute.
- I have read the "Notes for Membership Application" before completing this form.

Signature _____

Date _____

CHECKLIST

Before submitting the form, please ensure that:
(Please put a "✓" in the appropriate boxes)

- you have completed this Membership Application Form.
- you have signed and dated the Acknowledgement and Declaration.
- you have enclosed a copy of your Hong Kong / Macau / Overseas Identity Card / Passport.
- you have enclosed a cheque or filled in the credit card payment instructions (except paid by cash).
- you have read the **Notes for Membership Application**.

FOR OFFICE USE ONLY

Paid by <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/e-Cheque <input type="checkbox"/> PPS <input type="checkbox"/> Credit Card	Received by	Updated by	Verified by	Confirmation sent
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Hong Kong Head Office:

Address: 3/F., Guangdong Investment Tower, 148 Connaught Road Central, Sheung Wan, Hong Kong

Telephone no.: (852) 2153 7800 Fax no.: (852) 2544 9946 E-mail: hkib@hkib.org Website: <http://www.hkib.org>

Beijing Representative Office:

Address: Unit 07, 26/F BEA Tower, Building 1, 5 Guanghua Road, Chaoyang District, Beijing, China (Post Code: 100020)

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