

Individual Membership Application Form

A. PERSONAL PARTICULARS

Name(s) should be the same as your identification document.

English Name: (Mr/Mrs/Ms) _____ (surname) _____ (other name)

Chinese Name: _____ (if any) HKID / Passport No.: _____

Contact No.: _____ Email Address: _____

Please send all HKTA's correspondence to (please tick one): Residential Address Office Address

Correspondence address: _____

B. EMPLOYMENT STATUS

(Please tick as appropriate) Employed Unemployed Self - Employed Retired

Job Title: _____ Date of Commencement: _____

Company Name : _____ Tel. No.: _____

Office Address: _____

C. EDUCATION INFORMATION

Name of Institution	Qualification Obtained	Country	Year of Award	Certificate attached (✓)

D. PROFESSIONAL QUALIFICATION

Name of Professional Body	Qualification Obtained	Way of obtaining	Country	Year of Award	Certificate attached (✓)

E. DECLARATION AND ACKNOWLEDGEMENT

1. I declare that the information provided in this form is true and correct in all respects.
2. I understand that as a member of the HKTA I shall be bound by the prevailing Articles of Association.
3. I have read the “**Notes for Membership Application**” under **G** before completing this form.
4. In regard to Personal Information Collection and Data Privacy Statement, I hereby undertake to update the HKTA if there are any changes to my personal data or circumstances which may have a material impact on my membership application or status. I further:
 - (a) authorize the HKTA to share all information in connection with my application with any designated persons as may be required from time to time to access my eligibility for this application;
 - (b) authorize the HKTA and any designated persons to contact my current employer, my previous employers, educational institutions, industry associations or regulatory authorities in order to verify the information provided in this application; and
 - (c) agree that the HKTA may contact me about seminars and courses they hold or which other associations may hold and which The HKTA believe may be of interest to me.

OR I do not agree to authorize the HKTA regarding points (a), (b) and (c) above.

5. I confirm that, as part of this application, I will adhere to the minimum standards of practice when performing the functions of trustees with one or more of the HKTA Best Practice Guides (as indicated below) and that I will, in the conduct of carrying out the duties of trustees and where applicable, observe and perform the Guiding Principles as therein described to the best of my abilities.

(Please tick where appropriate)

- Best Practice Guide for Trustees of Pension Schemes
- Best Practice Guide for Trustees of Corporate Trusts
- Best Practice Guide for Trustees of Private Trusts
- Best Practice Guide for Trustees of Charitable Trusts
- Not applicable (*Please provide reasons for checking this box*) _____

I acknowledge that it should not be inferred or understood from my adherence of the HKTA Best Practice Guides (as indicated above) or from any statement by me that I have adhered to such Best Practice Guides or observe and perform the standards of practice or Guiding Principles therein contained or described, that the HKTA endorses me or my standard of performance or otherwise in the carrying out of my duties or activities as trustee.

6. I declare that I am a fit and proper person and have **No**
 - Conviction Records under
 - the Anti-Money Laundering and Counter-Terrorist Financing Ordinance (Chapter 615)(AMLO);
 - section 14 of the United Nations (Anti-Terrorism Measures) Ordinance (Chapter 575);
 - section 25(1), 25A(5) or (7) of, or an offence specified in Schedule 1 to, the Drug Trafficking (Recovery of Proceeds) Ordinance (Chapter 405); and
 - section 25(1), 25A(5) or (7) of, or an offence specified in Schedule 1 or 2 to the Organized and Serious Crimes Ordinance (Chapter 455).
 - Non-Compliance records of any requirement imposed under the AMLO or regulation made by the Registrar of Companies under section 53ZM of the AMLO
 - Bankruptcy Record and is not subject to any bankruptcy proceedings under the Bankruptcy Ordinance (Chapter 6)
7. I confirm that I have read and understood the requirements and information in this Application, including the Personal Information Collection and Data Privacy Statement set out in the HKTA website at www.hktrustees.com and consent to the terms and conditions therein..

Signature of Applicant

Date

F. PAYMENT METHOD

Membership fee paid is non-refundable and non-transferable. (Please tick as appropriate)

- Cheque payment of **HK\$2,000** (made payable to "HK TRUSTEES' ASSOCIATION LTD") and sent to **HKTA, Room 745, 7/F, Grand Millennium Plaza, 181 Queen's Road Central, HK. (Post-dated cheques will NOT be accepted.)**
- By local bank transfer (to Standard Chartered Bank A/C No.: 447-0-024582-3). Please email the bank receipt (indicate "individual membership application fee" and applicant's full name on it) to queries@hktrustees.com
- By overseas bank transfer (to Standard Chartered Bank A/C No.: 447-0-024582-3). Please email the bank receipt (indicate "individual membership application fee" and applicant's full name on it) to queries@hktrustees.com
(Note: Applicant should bear the bank charges involved in overseas bank transfer. Otherwise, the Association will reserve the right to request the applicant to pay back the bank charges)

NOTES FOR MEMBERSHIP APPLICATION

1. Membership is subject to renewal on an annual basis (based on calendar year).
2. Current members who fail to pay the membership renewal fee on or before **31st January of each calendar year** will be treated as default members. If the default member is seeking re-instatement of membership, the defaulting member is required to pay the membership renewal fee for the current year plus a Re-registration Fee of **HK\$1,000**.
3. Membership approved after 1st July of each calendar year will not be requested to pay for renewal of the following year.
4. Personal Information Collection and Data Privacy Statement: The HKTA undertakes to keep your personal information confidential, stored in a secured environment, and shall not use your personal data for any purpose other than that intended by this application, without your express permission.

G. SURVEY INFORMATION

(Please tick as appropriate. The collected data will be for internal use by HKTA for understanding the profile of members.)

1. How did you hear about HKTA?

- | | |
|----------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> TTC course | <input type="checkbox"/> Colleagues/ Friends/ Relatives |
| <input type="checkbox"/> HKTA Seminars | <input type="checkbox"/> HKTA website |
| <input type="checkbox"/> Employers | <input type="checkbox"/> Others: _____ |

2. Your employer is a/an

- Independent trust company
- Bank or subsidiary of a bank
- Law firm
- Accounting or tax services firm
- Corporate services firm
- Family office
- Independent financial adviser
- Charitable trust company
- Others (please specify) : _____

3. Type of business undertaken by employer

- Private Trusts
- Unit Trusts/ Fund services
- ORSO retirement schemes
- MPF retirement schemes
- Estate planning
- Legal services
- Company secretarial services acting as trustee
- Banking services
- Custody
- Commercial trusts/ escrow
- Family office
- Others (please specify): _____

Hong Kong Trustees' Association

Email: queries@hktrustees.com

Rm 745, 7/F, Grand Millennium Plaza, 181 Queen's Road Central, HK

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4. Hierarchy of your current job position

- | | |
|----------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> General Manager / Head of Department | <input type="checkbox"/> Partner / Proprietor / Sole Proprietor |
| <input type="checkbox"/> Senior Executive (e.g. CEO, CFO, COO) | <input type="checkbox"/> Legal Counsel |
| <input type="checkbox"/> Senior Manager | <input type="checkbox"/> Manager |
| <input type="checkbox"/> Deputy / Assistant Director | <input type="checkbox"/> Senior Manager |
| <input type="checkbox"/> Executive Director/ Director | <input type="checkbox"/> Others (Please specify: _____) |

5. Main areas of your current job

- | | |
|-------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Private Trusts | <input type="checkbox"/> Unit Trusts/ Funds Services |
| <input type="checkbox"/> ORSO retirement schemes | <input type="checkbox"/> MPF retirement schemes |
| <input type="checkbox"/> Estate planning | <input type="checkbox"/> Legal services |
| <input type="checkbox"/> Company Secretarial services acting as trustee | <input type="checkbox"/> Banking services |
| <input type="checkbox"/> Custody | <input type="checkbox"/> Commercial Trusts/ Escrow |
| <input type="checkbox"/> Family Office | <input type="checkbox"/> Others (Please specify: _____) |

I. CHECKLIST (Please tick as appropriate.)

Before submitting the form, please ensure that the following are included in the application:

- completed Membership Application Form
- personal identification document
- signed and dated the Declaration and Acknowledgement
- a cheque payable to the "HK Trustees' Association Ltd" or settle by bank transfer
- business card
- certified copies of educational and professional certificates
- completed the survey
- you have read the Notes for Membership Application

FOR OFFICE USE ONLY

Received on _____
 Checked on _____
 e-Receipt sent on _____
 Confirmation on : _____
Membership No.: _____