



# Forum of Indian Professionals

Unit B&C, 15<sup>th</sup> Floor, Casey Aberdeen House, 38 Heung Yip Road, Wong Chuk Hang, Hong Kong.

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Website: [www.fiphk.com](http://www.fiphk.com)

## Membership Application Form 2019

Membership Categories & Event Benefits		
Membership Categories	Membership fees (HK\$)	Event benefits
<b>Option 1</b> <input type="checkbox"/> Individual <input type="checkbox"/> Couple <input type="checkbox"/> Corporate (3 named persons) Addition member: _____ members	> \$4,800/ member > \$8,600/ couple > \$12,750/ 3 named members > \$4,250/ addition named member	Includes participation fees for all events of the Forum under its own name or co-hosted with other associations/ organizations.
<b>Option 2</b> <input type="checkbox"/> Individual	> \$1,300/ member	Members will be required to pay for each event they attend.
<b>Option 3</b> <input type="checkbox"/> Student/ Associate	> \$500/ member	Members will be invited for select events and will be required to pay for each event they attend.

### Member's Information – For Individual and Student/ Associate

Family Name \_\_\_\_\_  
 Given Name \_\_\_\_\_  
 Company/ University \_\_\_\_\_  
 Industry/ Major \_\_\_\_\_  
 Correspondence Address \_\_\_\_\_  
 \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Contact Number \_\_\_\_\_ (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ (Mobile)

### Member's Information – Member's Spouse (For Couple Membership)

Family Name \_\_\_\_\_  
 Given Name \_\_\_\_\_  
 Company/ University \_\_\_\_\_  
 Industry/ Major \_\_\_\_\_  
 Correspondence Address \_\_\_\_\_  
 \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Contact Number \_\_\_\_\_ (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ (Mobile)

## Member's Information (For Corporate Membership)

Company .....  
 Industry .....  
 Correspondence Address .....  
 Admin/ Billing Contact .....  
 (Tel) ..... (Email) .....

	Member #1	Member #2
Salutation	Mr./ Mrs./ Ms./ Dr./ Others:	Mr./ Mrs./ Ms./ Dr./ Others:
Family Name, Given Name	.....	.....
Title	.....	.....
Email Address	.....	.....
Contact Number (Mobile)	.....	.....
Contact Number (Work)	.....	.....

	Member #3	Member #4
Salutation	Mr./ Mrs./ Ms./ Dr./ Others:	Mr./ Mrs./ Ms./ Dr./ Others:
Family Name, Given Name	.....	.....
Title	.....	.....
Email Address	.....	.....
Contact Number (Mobile)	.....	.....
Contact Number (Work)	.....	.....

Note:

- Membership fees cannot be refunded under any circumstances.
- Payment Methods:  
Payment by post  
*You may mail your cheque together with this Application Form to "Forum of Indian Professionals, Unit B & C, 15<sup>th</sup> Floor, Casey Aberdeen House, 38 Heung Yip Road, Wong Chuk Hang, Hong Kong".  
 The cheque should be crossed, and made payable to "FORUM OF INDIAN PROFESSIONALS".  
 The member(s)'s name should be written on the back of the cheque.*  
Payment by electronic means  
*You may pay by bank ATM or via the Internet to the Forum's HSBC bank account.  
 Account Number: 502-075864-001.  
 Please send a scanned copy of the transaction advice with this Application Form to [accounts@fiphk.com](mailto:accounts@fiphk.com) and [members@fiphk.com](mailto:members@fiphk.com) or by facsimile transmission to +852 3520 4529.*
- All events hosted by FIPHK are for members and their invited guests only. Members must present valid membership before enrollment in FIPHK's activities.
- Personal Information Collection Statement:  
 Forum of Indian Professional ("FIPHK") undertakes to comply with the requirements of the Personal Data (Privacy) Ordinance to ensure that personal data kept are accurate and secured. Your personal information provided will be used for the purposes of keeping of records and communication between FIPHK and members and in connection with the activities of FIPHK. If you do not wish to receive any communication from us or wish to access to or make changes to your personal data, please email your full name together with your membership details, telephone number and email address to [accounts@fiphk.com](mailto:accounts@fiphk.com) and [members@fiphk.com](mailto:members@fiphk.com). For any enquiries, please contact us at 2528 0002.
- I hereby declare that all information given in the application form is, to the best of our knowledge, accurate and complete.

Signature \_\_\_\_\_

Date \_\_\_\_\_

For Official Use:	Membership fee :	Receipt no.:
	Membership no.	Received date: