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| Application/Renewal Form for HKUCA Membership (2018/19) | |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, would like to apply / renew the membership of HKUCA. | |
| Personal Data | |
| Name of current Company : | |
| Position Title or description of occupation : | |
| Business address | |
| Preferred Contact Phone no. | Preferred email address |
| ***Membership Fee*** | ***HK$ 150 per annum*** |
| *Please make the cheque payable to* ***“Hong Kong Underwriting and Claims Association Limited”*** *and send to:*    **Mr Ben Choi**  **61st Floor, Central Plaza, 18 Harbour Road,**  **Wanchai, Hong Kong SAR** | |
| Declaration | |
| I desire to become a member of / update the personal particulars with Hong Kong Underwriting & Claims Association Ltd. (HKUCA). In the event of my admission as a member, I agree to be bound by the rules of the HKUCA for the time being inforce. I also agree to have my name and company posted in the HKUCA website.  By signing below, I confirm that I have read and agree to the Personal Information Collection Statement and Privacy Policy Statement ("Statement"). In particular, I consent to receiving information as stated in paragraph 5 of the Statement and agree to the usage of the photos and videos as stated in paragraph 6 of the Statement. | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: / / \_\_\_\_\_\_\_\_\_\_  **Signature of Member** MM / DD / YY | |
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