



International Association of CFOs & Corporate Treasurers (China)
“Association”
国际企业财资（中国）协会

AFFILIATE INDIVIDUAL MEMBERSHIP APPLICATION FORM 个人会员会籍申请表

Please read the **MEMBERSHIP INFORMATION** at the end before completing the form below. (If there is no change to personal data, current members need only fill in their name and membership number for renewal).

填写表格前请先参阅会籍资讯（如个人资料没有变更，已入会人士只须填上姓名及会员编号以作更新会籍之用）

New Application
申请成为会员

Membership Renewal 更新会籍

Change of Personal Data
更改个别项目

Membership No. _____
会员编号申请成为会员

AFFILIATE INDIVIDUAL MEMBERSHIP
个人(附属)会籍

Title *Mr / Mrs / Ms

称呼: *先生 / 太太 / 女士

Identity Card / Passport No.

身份证 / 护照号码: _____

* Please delete as appropriate or use any academic or professional title as may be applicable.
请删去不适用或另加上适合之称呼

Name in English 英文姓名 _____

Name in Chinese 中文姓名 _____

Date of birth 出生日期 _____

Job title & Name of organization 职位及公司名称
or Occupation 职位

Professional qualifications 专业资格
(if applicable)

Postal address
联络地址

Telephone 电话 _____

Mobile
流动电话 _____

Fax 传真 _____

Email
电邮 _____

Your organization's industry (Please tick) 现职机构的行业 (请选择)

- | | |
|--|---|
| <input type="checkbox"/> Banking 银行 | <input type="checkbox"/> Information Technology 资讯科技 |
| <input type="checkbox"/> Conglomerate 企业集团 | <input type="checkbox"/> Insurance 保险 |
| <input type="checkbox"/> Consultancy 顾问 | <input type="checkbox"/> Non-profit 非牟利 |
| <input type="checkbox"/> Education 教育 | <input type="checkbox"/> Real Estate 房地产 |
| <input type="checkbox"/> Energy (Mining/Oil/Gas) 能源 | <input type="checkbox"/> Retailing/Wholesaling 零售/批发 |
| <input type="checkbox"/> Entertainment/Media 娱乐/媒体 | <input type="checkbox"/> Telecommunications 电讯 |
| <input type="checkbox"/> Financial Services 金融服务 | <input type="checkbox"/> Transportation/Logistics 运输/物流 |
| <input type="checkbox"/> Funds/Investment Management 基金/投资管理 | <input type="checkbox"/> Utility (Gas/Electricity/Water) 公用事业 |
| <input type="checkbox"/> Hotel/Leisure/Tourism 酒店/康乐/旅游 | <input type="checkbox"/> Other (please specify) 其他(请列明) |
| <input type="checkbox"/> Industrial/Manufacturing 工业/制造业 | |
-

Your primary job function(s). (Please tick one or more) 现职主要工作范围(请选择一个或以上)

- | | |
|---|--|
| <input type="checkbox"/> Academic 学术 | <input type="checkbox"/> Investment 投资 |
| <input type="checkbox"/> Accounting/Financial Reporting 会计 | <input type="checkbox"/> Investor Relation 投资者关系 |
| <input type="checkbox"/> Auditing 审计 | <input type="checkbox"/> Payment (Accounts Payable) Management 应付帐项管理 |
| <input type="checkbox"/> Bank/Relationship Management 银行关系管理 | <input type="checkbox"/> Receivables (Accounts Receivable) Management 应收帐项管理 |
| <input type="checkbox"/> Cash/Liquidity Management 现金流量管理 | <input type="checkbox"/> Project Finance 项目融资 |
| <input type="checkbox"/> Compliance/Legal 法规 | <input type="checkbox"/> Risk Management/Hedging 风险管理/对冲 |
| <input type="checkbox"/> Consulting 顾问 | <input type="checkbox"/> Senior Management 高级管理层 (CEO/COO/CFO) (首席执行官/首席营运官/首席财务官) |
| <input type="checkbox"/> Corporate Finance 企业融资 | <input type="checkbox"/> Taxation 税务 |
| <input type="checkbox"/> Corporate Treasury 企业财资 | <input type="checkbox"/> Venture Capital/Private Equity 创业及私募投资 |
| <input type="checkbox"/> Credit Management 信用管理 | <input type="checkbox"/> Other (please specify) 其他 (请列明) |
| <input type="checkbox"/> Education/Training 教育/培训 | |
| <input type="checkbox"/> Foreign Exchange 外汇 | |
| <input type="checkbox"/> Information Technology/Treasury System 资讯科技/财务系统 | |
-

Reference Person 介绍人

Name in English 英文姓名 _____

Name in Chinese 中文姓名 _____

Occupation 职位 _____

Organisation 现职机构 _____

Telephone 联络电话: _____

Email address 电邮 _____

Postal address 联络地址 _____

IACCT member No 否

国际企业财资(中国)协会会员

Yes 是

Membership no. 会员编号 _____



building best treasury practice

MEMBERSHIP INFORMATION

MEMBERSHIP

Under the Memorandum and Articles of Association and the Rules of Association, Affiliate Individual Membership is open to individuals:

- (i) Who are not practising treasurers but who provide a service to corporate treasury and its related functions.
- (ii) Who are studying for a career in corporate treasury and finance.
- (iii) Who agree with and support the objectives and purposes of the Association.

FEES

Current membership fees for **Affiliate Individual Membership** are HK\$1,000 per 12 calendar months from January to December.

These fees are pro-ratable by month in the first year of joining.

Unsuccessful applicants will have the membership fee returned to them in full.

NOTES

1. Please complete the application form in BLOCK letters.
2. Please include your business card or student card for Affiliate Individual Membership application
3. Please send your application plus a cheque for the appropriate annual membership fee drawn in favour of the "International Association of CFOs and Corporate Treasurers (China) Limited" to Mr. Francis Ho (Vice President - Membership, IACCT China), c/o Group Treasury Department, CLP Holdings, 147 Argyle Street, Mongkok, Kowloon, Hong Kong SAR, P.R.C.)
4. Each member shall be obliged to:
 - (i) Abide by the objects, articles and rules of the Association and the resolutions passed by the Executive Committee, Annual General Meetings and Extraordinary General Meetings; and
 - (ii) Pay any fees promptly as and when they fall due, including annual membership fee in advance for each membership period of 12 calendar months from January to December.
5. The Executive Committee of the Association has the sole discretion to accept or decline applications for membership without providing any reasons. Such decision shall be final.
6. Members will receive a membership card or certificate upon admission and will be entitled to hold the card or certificate as long as the membership remains valid. In the case where the membership is terminated or ceased, the original copy of the membership card or certificate has to be returned to the Association immediately.

I hereby apply for **Affiliate Individual Membership** of the Association and submit the particulars for your reference and approval. I confirm that:

- (a) I have read the Membership Information concerning my application for Full Individual Membership;
- (b) I fully understand the contents and agree to abide by the objects, articles and rules of the Association; and
- (c) I undertake not to perform any action(s) to the detriment of the Association or I shall be subject to disciplinary action (including dismissal from the Association).

本人在此申请协会会籍并提交以上资料以供参考及认可。

本人确认已细阅有关申请会籍的资料，而且明白当中内容亦同意并愿意接受所述条款。

本人承诺不会作出伤害协会的行为，亦同意协会有权对违规会员作出惩罚（包括开除会籍）。

Signature 申请人签署_____

Name of organization 机构名称_____

Print name 姓名_____

Date 日期_____

Job title 职位_____

For office use only 此欄不用填写

Application received on:

Approved by:

Date:

Membership Number:

Valid Membership Period:

Certificate issued on:

Information updated on:
