

# 註冊財務策劃師協會 Society of Registered Financial Planners

# **Membership Application Form**

PERSONAL PARTICULARS (Typewritten or block capitals)	
Title: Dr./Mr./Mrs./Ms/Miss * Sex: Male/Female *	
Surname: Given names:	Please affix
Hong Kong Identity Card Number:	a recent photo
Date of Birth (DD/MM/YY): / / Nationality:	
Daytime Tel. No.: Mobile Tel. No.:	
Email address: Fax No.:	
Correspondence address:	
Name of Employer/Business	
Nature of Business:	
Employer's Address:	
Membership Applied For: (Please check box below)	
☐ Student member ☐ Associate member ☐ Full member ☐ Fellow	member
ACADEMIC AND PROFESSIONAL QUALIFICATIONS Please list relevant technical, academic and professional examinations passed (highest l Please attach copies of these certificates.	evel in each field only).
Name of Educational Institute Highest Grade	Date Passed
Name of Educational Institute Highest Grade Attended	Date Fassed

<sup>\*</sup> Delete where appropriate

Membership of Profession	onal or Occupational Instit	utions		
Name of	Professional Institute		Designation	Date Admitted
WORKING EXPERIE	NCE			
Organization	Position	Resn	onsibilities *	Date (from/to)
Organization	1 Osition	КСЗР		(the most recent first)
* Please attach a separate sheet	if space provided is insufficient.			
REFEREE				
Name of Referee	Company Name	Position	Professional	Telephone no.
(1)	Company Nume	1 oblica	Designation	rerephone no.
In my view, the applicant Registered Financial Planne	is a fit and proper person ers.	to be admitted as		Signature:
Name of Referee	Company Name	Position	Professional	Telephone no.
(2)			Designation	
In my view, the applicant	is a fit and proper person	to be admitted as	member of Society of	
Registered Financial Planne				Signature:
APPLICATION FOR E	EXEMPTIONS(S) cexemption(s) for any co	ourse or examinat	ion, the following do	cumentation must be
provided with this applic	ation:			
(a) Evidence that you have academic record, tran	ve completed courses in ed script results)	quivalent to the co	ourse for which credit	is being claimed (e.g.
	ry description of the sylla	bus for the modul	e(s)	
Exemption Applied	For State the C	ourse / Programm	ne / Institution	Month/Year
Exemption Applied	1 of State tile C	You have taker		ualification Obtained

#### **FEES**

	HKD	
Administration fee (non-refundable)	700	
Student	500	
Associate	700	
Full Member	1,000	
Fellow	1,200	
	Total	

For official use only					
Membership category:					
Student					
Associate					
Full Member					
Fellow					
Fees received: HK\$					
Secretariat					
Secretariat					

## **SUBMISSION**

After completing this Application Form, please send the Form, together with a cheque (being application fee and made payable to "Society of Registered Financial Planners") and the supporting documentation (copies only please, they will NOT be returned) to:

## **Society of Registered Financial Planners**

P.O. Box 1254, General Post Office,

Central, Hong Kong

Telephone: (852) 3105 1744 Whatsapp: (852) 9078 1829 Facsimile: (852) 2186 7136 E-mail: info@hkrfp.org Website: www.hkrfp.org

### **DECLARATION**

- 1. I declare that all information given in this Application Form and the attached documents are, to the best of my knowledge, true, accurate and complete.
- 2. I undertake to observe and abide by the Code of Ethics and Memorandum and Articles of Association of Society of Registered Financial Planners ("HKRFP"). In the event of my resignation from membership, I agree to pay all arrears of subscription due to HKRFP to the date of the surrender of my membership certificate.

## **Application Procedures**

## 1. Application

Application can be done in person or by mail to HKRFP by completing the Application Form together with the application fee and relevant supporting documents.

### 2. Application Form

Application Form may be:

- downloaded from the HKRFP website http://www.hkrfp.org; PDF format, DOC format or
- obtained in person at the HKRFP office

## 3. Check list for application

Applications will only be accepted if the following requirements are met:

- Application Form signed and dated;
- Hong Kong Identity Card Copy;
- Application fee enclosed;
- Your photo:
- Supporting documentation for education and work experience qualifications enclosed;
- Signed recommendation from two Referees with professional designation for qualified work experience; and
- Application to Fellow Membership, please provide a description of significant recognized contribution to the profession, which should be certified by referees with professional designation membership.

Incomplete applications will not be processed until all requirements have been met.

#### 4. Submission

• Application fee must be submitted with the form together with a crossed cheque made payable to "Society of Registered Financial Planners" at:

#### P.O. Box 1254, General Post Office, Central, Hong Kong.

• Upon receipt of the Application Form, an acknowledgement letter will be issued to the applicant.

#### 5. Notification of Application Result

 Results of Applications will be sent to the applicants within ONE MONTH upon receipt of application

#### 6. Unsuccessful Application

- For unsuccessful applications, the administration fee will not be returned.
- Any other paid fees will be refunded to the applicant for unsuccessful applications.