



# 會員申請表 Membership Application Form 2019







Marshay Danayya











# GAMAHK 會員申請 GAMAHK Membership 2019 會籍類別 Membership Categories



### 國際會員 International Member

Any person who is working in agency management in life insurance industry and possessed an international award(s)
which is recognized by the Board. By qualifying for an International Member, applicant is automatically granted for the
Active Member or Chartered Member subject to the discretion of the Board.

申請人須從事壽險業管理工作及持有協會認可之國際榮譽獎項。(國際會員同時將授與為核准會員或特許會員,以董事局作最後決議)

#### 特許會員 Chartered Member

 Any person who is working in agency management in life insurance industry and possessed a professional designation granted by an institution or organization which is approved by the Board

申請人須從事壽險業管理工作及持有協會認可之行業資格認證\*\*

# 核准會員 Active Member

 Any person who is working in agency management in life insurance industry 申請人須從事壽險業管理工作

## 協會會員 Associate Member

 Any person who is interested in agency management (trust officers, lawyers, home office personnel, publishing house officials, financial planners, etc.)

有興趣於團隊管理及發展工作,包括:信託管理、律師、企業人員、財務策劃師等

會籍類別	GAMA獎項	GAMAHK榮譽獎項 LBA, TRA, BGA, RM		MA國際榮譽獎項 IAA, IMA, FLA
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#### 會籍類別及會員福利 Membership Categories and Benefits of GAMA Members • 尊享優越國際會員價參與 LAMP 及 GAMAHK 管理研討會 國際會員 • 尊享優越國際會員價報讀 GAMA International 及 GAMAHK 教育課程及產品 International Member • 尊享優越國際會員價租用 GAMAHK 場地及設施 HK\$1,380 • GAMA International 期刊 (US\$175) • 申請 GAMA 國際榮譽獎項\*及 GAMAHK 榮譽獎項\*,並可參與 GAMA 國 際榮譽獎項頒獎典禮\*、於紀念特刊及報章上刊登相片及榮獲之殊榮 特許會員 尊享優越特許/核准會員價參與 GAMAHK 管理研討會 **Chartered Member** • GAMAHK季刊《鋭集》 • 尊享優越特許/核准會員價報讀 GAMAHK 教育課程及產品 HK\$600 • 尊享優越特許/核准會員價租用 GAMAHK 場地及設施 核准會員 • 申請 GAMAHK 榮譽獎項\*,並可參與 GAMA 國際榮譽獎項頒獎典禮\*、 **Active Member** 於紀念特刊及報章上刊登相片及榮獲之殊榮 HK\$600 協會會員 尊享協會會員價參與 GAMAHK 管理研討會 **Associate** 尊享協會會員價報讀 GAMAHK 教育課程及產品 Member • 尊享協會會員價租用 GAMAHK 場地及設施 HK\$300 備註:\*需另行報名

#### 2019年會員申請表 MEMBERSHIP APPLICATION FORM 請於適當的空格內加上(**人**) Please put a (**人**) in the appropriate box. 申請人相片 Applicant Photo 會員續會 MEMBERSHIP RENEWAL 新會員申請 NEW MEMBER (相片將用作行政紀錄及 \*請細閱及繼續填寫本表格之背頁 (會員號碼 Membership no.: 778999\*0000 榮譽獎項頒獎禮之用, Please read carefully and continue fill in 如沒有更新通知,本會將 back page of the applicant form 沿用舊有相片。) (Photo will be used for the 會員類別 Types of Membership purpose of administration HK\$600 國際會員 International Member HK\$1,380 特許會員 Chartered Member and award presentation. Existing photo will be used if 核准會員 Active Member HK\$600 協會會員 Associate Member HK\$300 no prior notification received.) 歡迎現有會員透過本會網站(www.gama.com.hk)辦理續會手續! PART A: 個人資料 PERSONAL PARTICULARS 請用藍色/黑色原子筆以英文正楷填寫 Please complete this form in BLOCK letters using black or blue pen. □ 資料維持不變 Remain unchanged (只適用於續會會員) (先生/女士/太太/小姐) 英文全名 Name in English: (MR./MS./MRS./MISS) 中文全名 Name in Chinese : \_\_\_\_\_\_ (與証件上名字相同 Same as HKID / Passport) \_\_\_\_\_(\_\_) 出生日期 Date of Birth:\_\_\_\_\_ DD/MM/YY 國籍 Nationality:\_\_ 身份證號碼 I.D. No.:\_\_\_ 公司名稱 Name of Company: \_\_\_\_\_ 職位 Title:\_ 公司地址 Office Address: \_\_\_ \_ 手提電話 Mobile:\_\_\_ 公司電話 Office Tel.: \_\_\_ 電郵地址 E-mail Address:\_\_\_ WhatsApp: \_\_\_ 教育程度 Highest Education Level □ 碩士 Taught Master □ 中學 Secondary School □ 大專 Post Secondary □ 大學 Bachelor □ 研究生 Post Graduate □ 博士 Doctoral Degree □ 其他 Others : 行業資格/認證 Professional Attainments ☐ AMTC ☐ CIAM ☐ CFP ☐ CICFP ☐ ICFP ☐ CLU ☐ CMFA ☐ ChFC ☐ EDM ELM ☐ FChFP ☐ FLMI ☐ IFPC ☐ LUTCF RFC RFP ☐ CFFL $\square$ ALDM Chl DM □ 同等資格/認證(請列明): \*\*(申請人士必須提供相關證明,以供審核。) 曾獲獎項 Awards □ IMA ☐ TRA □BGA RMA □ LBA ☐ MAA □ FIA ■ MDRT ☐ MDRT(Life member) ☐ QMA □ 其他 Others:\_ □ IQA ☐ MQA □ DMA □ DAA QAA PART B: 建議人及附議人 PROPOSER AND SECONDER 請用藍色/黑色原子筆以英文正楷填寫 Please complete this form in BLOCK letters using black or blue pen. 建議人及附議人必須是本會核准會員、特許會員或國際會員 Proposer and Seconder must be a GAMAHK Active Member, Chartered Member or International Member 本人(簽名人)認識申請人並(1)相信他/她乃合乎道德,操守及專業水平,有資格成為會員及(2)宣告相信申請人資料均屬真實無訛。 We, the undersigned, are acquainted with applicant and (1) believe him/her to be a person of good moral, ethical and professional standing and in every respect eligible to become a member of the association, and (2) declare that the particulars of the applicant are true and correct to the best of my knowledge. 建議人 PROPOSER \_\_\_\_\_ 會員號碼 Membership no. : 778999\*0000 \_\_\_\_\_ 英文全名 Name in English: \_\_ 公司 Name of Company: \_\_ 職位 Title:\_ 電話 Tel. no.: \_\_ 日期 Date: \_\_ 建議人簽署 Signature of Proposer: \_\_\_\_\_\_\_ 附議人 SECONDER \_\_ 會員號碼 Membership no. : 778999\*0000 \_\_\_ 英文全名 Name in English: \_\_ 職位 Title : \_ 公司 Name of Company: \_\_\_ 電話 Tel. no.: \_\_ 日期 Date: \_\_ 附議人簽署 Signature of Seconder: \_\_\_

	PART C : 付款	資料 PAYMENT INF	FORMATION				
請於適當的空格內加上(✔	Please put a ( 🗸 ) in the app	ropriate box.					
□ 現金 Cash □ 支票	Cheque (支票抬頭 Payable to " <b>(</b>	GAMAHK Ltd.") 銀行 Bank:.	支票號碼 Chec	que Number :			
☐ 信用卡 Credit Card ☐ VISA Card ☐	MasterCard *恕不接受 Unior	iPay(銀聯卡)及American Ex	press(美國運通卡)				
信用卡號碼 Credit Card	d Number :	屆滿日期 Expiry Date	屆滿日期 Expiry Date:				
持卡人姓名 Name of C	ard Holder :	金額 Total Amount : _	金額 Total Amount :				
持卡人簽署 Signature o	of Card Holder :	日期 Date :	日期 Date :				
	2/2	備註 REMARKS	AY - 35	AC A			
♣ 請注意下列事項 Please not	te the following items						
會籍有效期至該年度之 12 月 31 日止。GAMAHK membership is valid until 31st December every year.							
□ 請填妥表格中所須資料,並簽署確認。Please complete the form with your signature.							
新會員須填妥 B 部份。For NEW member application, please complete PART B.     □							
簽署並填妥信用卡付款所須資料或附上劃線支票,抬頭請填寫 "GAMAHK Ltd."。Please provide the credit card information and confirm payment with card holder's signature or enclosed with a crossed cheque and payable to "GAMAHK Ltd.".							
申請一經批核,所有款項恕不退還。The membership fee is non-refundable once the payment has been settled.							
图下的公司地址將會用作通訊之用。Your office address will be your correspondence address.							
請提供彩色證件相片以用作行政紀錄及榮譽獎項之用。Please provide a color passport size photo for administration and awards program							
purpose.  □ 收集個人資料聲明一此會員申請表中收集之個人資料只用作為會員活動用途。Personal Data Disclaimer — Personal data collected in this application form will be used for membership activities only.							
7	Ē	朝 DECLARATION	5/12	SKIP			
	聲明表格中所提供的資料均屬真實 請或誤導,申請將不獲受理或遭擔		•	IAHK) 將該等資料作其行政			
□ 如不欲從香港人壽保險	檢經理協會收取資訊,請於 □ 內	以"✔"顯示。					
the information I have prov Association of Hong Kong (	declare that all the particulars giv vided in this form will be used for (GAMAHK). Any false or misleadii vaid is non-refundable and non-tr	or the purpose of administration ng information given will lead to	n and communication by Ger	neral Agents and Managers			
Please put a "\square" in the	e box if you would like to unsubs	cribe from future messages fro	m GAMAHK.				
日期 Date :		_ 簽署 Signature of Applicant					
此欄只供本會填寫 FOR OFFICE USE ONLY							
P籍類別 TYPE OF MEMBERSHIP	國際會員 International Member	特許會員 Chartered Member	核准會員 Active Member	協會會員 Associate Member			
Authorized Code	Date	Control Number	Handled By	Receipt Number			