



Form MA01

Affiliate Membership
香港調解專業協會附屬會員

Official Use only

Membership

Number: _____

Please complete this form and return it to:

via Mail: GPO 7860, Hong Kong
(Or by email: info@mediatorassociation.org)

Affiliate Membership Application Form

****English**

Name : _____

ID# or

Passport # : _____

Contact

No.: _____

Office

No.: _____

****Chinese**

Name : _____

Gender : F / M

Home No.: _____

Fax No.: _____

****Email :** _____

****Profession:**
(English) _____ (Chinese) _____

****Area of Practice:** please quote below code: ____/____/____/____/____/____/____

A01 Accountancy
B01 Banking & or Finance
B02 Building & or Survey
C01 Commercial
C02 Company Secretary
C03 Construction
C04 Computing & or IT
E01 Engineering
E02 Engineering - Civil
E03 Engineering - Electrical
E04 Environmental
E05 Entertainment

F01 Family Service
H01 Human Resource & or
Employment
H02 Hotel
I01 Insurance
I02 Intellectual Property
I03 Insolvency
L01 Legal - PRC
L02 Legal - Common Law
L03 Legal - Other Jurisdiction
M01 Management
M02 Medical

N01 Negligence
P01 Personal Injuries
R01 Recreational
S01 Securities
S02 Sports
S03 Shipping & Forwarding
T01 Tax
Others, please Specify

Correspondence/Home Address: _____



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General Information:

1. The application is subject to approval by the **Hong Kong Professional Mediation Association (HKPMA)**.
2. There are continuing professional development (CPD) courses offered to Affiliate member free of charge. Affiliate members shall complete 6 hours of CPD each year in order to maintain the HKPMA Aff membership.
3. The membership granted is subjected to review of HKPMA every year. The HKPMA has the sole discretion whether to continue or discontinue the membership of any individual at any time by serving a written notice to the registered address stated in this application form.
4. Membership Fee: <http://www.mediatorassociation.org/FT/article.asp?id=46>
5. Enquiry: 2110 0834
E-mail: info@mediatorassociation.org

PERSONAL DATA (PRIVACY) ORDINANCE NOTICE

Persons who supply data in their application to the Hong Kong Professional Mediation Association (HKPMA) are advised to note the following points pursuant to the Personal Data (Privacy) Ordinance.

1. Personal data provided in this application form will be used solely for the purpose of the said application, and in this connection the data herein will be dealt with by the HKPMA staff and/or by the HKPMA Mediator Accreditation Committee members/or by offices of HKPMA's Principal Organization.
2. After an application has been duly processed, the application papers of the candidates will be retained in a file established by the HKPMA for each applicant. Such information will be retained by HKPMA or the Principal Organization of HKPMA for as long as it deems necessary or useful.
3. Under the provisions of the Personal Data (Privacy) Ordinance, an applicant has the right to request access to, and the correction of, his/her personal data as retained by the HKPMA or its Principal Organization. Applicants wishing to access or make corrections to their data should submit written requests to the Secretary General of HKPMA or its Principal Organization.

Declaration:

1. I have read and agreed to the Personal Data (Privacy) Ordinance Notice.
2. I authorize the HKPMA and its Principal Organization, its/their staff, employees and/or members of the HKPMA Mediator Accreditation Committee to deal with, utilize and/or assess the data submitted by me as may be required in connection with my application.
3. I understand that my data will become a part of the HKPMA's files and may be used for all purposes deemed necessary or useful by the HKPMA and its Principal Organization.
4. I declare that the information given in support of this application is accurate and complete. I understand that any misrepresentation will disqualify my application and may lead to revocation of my application, should the application is accepted. HKPMA Mediator Accreditation Committee and offices of HKPMA's principal organization also reserves the right to report the matter to my professional body/association.
5. I confirm that I am familiar with and will adhere to the HKPMA and its principal organization Guidelines for Professional Practice of Mediators General Ethical Code.
6. Any information on this form may be made available by HKPMA and its principal organization to third parties for the purposes of assessment or selection.

Please sign below to confirm information contained in the application is accurate, your consent to abide by the rules and regulations of the Hong Kong Professional Mediation Association (HKPMA) and your understanding that the application is subject to approval by HKPMA.

Signature: _____ Date: _____

(Information with “**” in this application will be shown on membership page of HKPMA website)