DECLARATION FORM

CPD Event: HKIS Exhibition cum Visit to Pakistan (CPD/HKIS/2019030)	
Date : 6 - 11 March 2019 (6 Days 5 Nights)	
I,, confirm that I fully understand and accept the	e risk of joining
the above event. Under no circumstances shall Hong Kong Institute of Surveyo	ors (HKIS), their
staff and/or agents be held liable for the consequence of any accidents whether	r or not they are
caused by the negligence of HKIS, their staff and/or agents.	
I also confirm that I would like HKIS to arrange	
O* a double bed room for me together with another member,	(name)
who will also join the HKIS Exhibition cum Visit to Pakistan	
O* a double bed room for me together with any other member (to be arranged	d by HKIS) who
will also join the HKIS Exhibition cum Visit to Pakistan	
O* a single bed room for me (with an additional fee of HK\$2,500)	
Signature: Membership No:	
Travel Document No. (Passport):	
Expiry Date of Travel Document (YYYY-MM-DD):	
Name as shown in your travel document (Chin. & Eng.):	
Current Employment (Company & Title):	
Mobile : (Hong Kong)	
Email:	
Emergency Contact :	
Emergency Contact's number :	
Remarks:	
1. Members who apply for participating the above HKIS Exhibition cum	Visit to Pakistan
shall be in good health conditions.	

- While HKIS or its agent has effected insurance policy for members joining the above 2. HKIS Exhibition cum Visit to Pakistan who have been accepted for joining the above event shall consider to procure an appropriate insurance policy to cover their own risks before attending the above HKIS Exhibition cum Visit to Pakistan.
- Please fill in the relevant information and tick the appropriate box O* in the above. 3.