

American Express Autopay Service Enrollment Form - The Hong Kong Institute of Surveyors

HKIS Membership Number:HKIS Annual Subscription Fee to be paid: HK\$	
Expiry Date:MM	YY
Card Holder Name:	
Contact Number:	
Email Address:	
signing below, I certify and agree that: (i) The above information provided by m	ican Express Card until further written notice. By
	ne is true and correct. Information that I have provided on this form with
(ii) I authorize HKIS to share the above in	
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