

DECLARATION FORM

CPD Event : PFMD Visit to Shenzhen (物業設施管理組深圳考察團)

Date : 31 May 2024 (Friday)

I, _____ (_____) (No. _____) [English and Chinese Name and No. in Home Return Permit (港澳居民來往內地通行證/回鄉證)], confirm that I fully understand and accept the risk of joining the above Visit. Under no circumstances shall the Hong Kong Institute of Surveyors (“HKIS”), their staff or agents be held liable for the consequence of any accidents whether or not they are caused by the negligence of HKIS, their staff and/or agents.

Signature: _____ Membership No: _____

Address: _____

Mobile: (HK) _____ / (China) _____ Email: _____

Emergency Contact: _____ Emergency Contact's Number: _____

Remarks :

1. Members who apply for participating the above Visit shall be in good health conditions.
2. While the travel agency will purchase basic insurance policy for members joining the above Visit, members shall consider to procure an appropriate insurance policy to cover their own risks before attending the above Visit.
3. Please check the availability of Valid travel documents.
4. Latecomers will NOT be picked up.