

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

HKIS Membership Registered Name: _____

HKIS Membership Number: _____

HKIS Annual Subscription Fee to be paid: HK\$ _____

American Express Card No: _____

Expiry Date: _____ MM _____ YY

Card Holder Name: _____

Contact Number: _____

Email Address: _____

I hereby authorize The Hong Kong Institute of Surveyors to charge my annual subscription fee for the above-stated membership to my American Express Card until further written notice. By signing below, I certify and agree that:

- (i) The above information provided by me is true and correct.
- (ii) I authorize HKIS to share the above information that I have provided on this form with American Express International, Inc.

Cardholder's Signature

Date

*Please use the same signature as appearing in your Card Account

Terms and Conditions:

The payment option for HKIS Annual Subscription Fee is subject to final approval by American Express.

Please return this form by either fax or by post **on or before 31 May 2024**.

(If you return the form by Fax, please do not post the original form to avoid duplication.)

Fax: (852) 2868 4612

Mailing Address: Room 1205, 12/F, Wing On Centre, 111 Connaught Road Central, Sheung Wan, Hong Kong.

FOR OFFICE USE ONLY

Approval Code: _____

Date: _____