



Participating Plan No. 參與計劃編號

FORM: IU (MEM) - TCM

To致: Bank Consortium Trust Co. Ltd. 銀聯信託有限公司

c/o orientiert XYZ Securities Limited (formerly known as AMTD Global Markets Limited)

orientiert XYZ Securities Limited (前稱尚乘環球市場有限公司)

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## **AMTD MPF Scheme – Information Update Form (For Scheme Member)**

成員資料

AMTD 強積金計劃 - 資料更新表格(計劃成員適用)

## Note 注意

Part I.

\_\_\_\_\_ Please mark "✓" in the appropriate box. 請於適用的方格內填上「✓」號。

AMTD MPF Scheme

**Member Details** 

Please countersign any alterations made in this form. 如須作出任何刪改,請於刪改之位置旁簽署。

第Ⅰ部份

Name of Plan 計劃名稱  AMTD 強積金  English (Mr / Ms / Mrs*)				Also apply the relevant update to all account(s) under my name in the selected plan(s) 有關更新▼亦適用於所選計劃下本人名下的所有戶口 Membership No. 成員編號			
Name of Member 成員姓名	中文 (先生/女士/太太*	·)					
Contact Phone No. 聯絡電話號碼				HKID Card No. 香港身份證號碼			
E-mail Address 電郵地址				Passport No. ( <u>ONLY</u> for member without HKID Card) 護照號碼(本欄 <u>僅供</u> 沒有香港身份證的成員填寫)			
Part II. Change of Personal Particulars 第II部份 更改個人資料							
Items	類別	Updated Information 最新資料					
□ Change of Name of Member 更改成員姓名 (Please provide the certified true copy of identification document, including Deed Poll and HKID Card / Passport, etc. 請提供正本核實的改名契及身份證明文件副本,如香港身份證 / 護照等。)		Chinese Name	英文) (English英文)				
□ Change of Date of Birth · 更改出生日期 ·		// D日 / M月 / Y年		□ Change of Nationality 更改國藉			
Change of Residential Address 更改住址 ("In-care-of" address and P.O. Box address will not be accepted. All correspondence will be sent to this address.「轉交」地址及郵政信箱恕 不接受,所有通訊將寄往此地址。)				Block 座			
		Street / Road 街道	District 地區				
		□ Hong Kong 香港	Overseas (Country and City) <sup>▽</sup> 海外(國家及城市) <sup>▽</sup>				
		□ Kowloon 九龍	Chi	☐ China 中國 (City 城市)			
		□ New Territories 新界	Oth	ners 其他(Please specify 請說明)			
				(Country 國家)(City 城市)			
		▽For overseas address 適用於海外地址					
* Delete as appropriate	請刪去不適用者						

▼ The relevant update applies to Part II only. 有關更新只適用於第II 部份。

<sup>+</sup> Please note that if you have selected the Default Investment Strategy ("DIS") as your Investment Mandate, if the updated information indicates that your age is between 50 Please note that if you have selected the Default investment strategy ( Dio ) as your investment invalidate, if the updated information indicates that your age is between to 64, and it falls into another age band as referred to in the DIS de-risking table, BCTC will adjust the asset allocation between the AMTD Invesco Core Accumulation Fund and AMTD Invesco Age 65 Plus Fund according to the DIS de-risking table for any investment in the DIS. If the updated information indicates that your age is 65 or above, your DIS will solely invest in AMTD Invesco Age 65 Plus Fund. The change of date of birth will apply to all account(s) under your name in the selected plan(s). 請注意知您已選擇預設投資策略 (「預設投資」)作為您的投資委託,若您更新資料後表明您是50至64歲間,並落入在預設投資策略預設投資降低風險列表中提及的另一年齡組別,銀聯信 託將根據該列表調整任何投資於預設投資下的AMTD 景順核心累積基金與AMTD 景順65 歲後基金的資產配置比例。如您更新資料後表明您已年滿65 歲,您的預設投資會全數 投資於AMTD景順 65 歲後基金。更改出生日期將適用於閣下在所選計劃下的所有戶口。



Part II. Change of Persona	ll Particulars 第Ⅱ部	7份 更改個人資料	(Continued	續)	ortivi. 10 (IVILIVI) — 10IV			
	□ E-mail Address 電郵地址							
	Fax No.							
	傳真號碼 Telephone No. Co	ountry Code Area Code	Phone No.		Ext.			
☐ Change of Contact Details	電話號碼 國 □ Local Mobile	家號碼 地區號碼	電話號碼		內線			
更改聯絡資料	本地手提 Business							
	辦公室  Residential							
	住宅							
	☐ China / Overseas 中國 / 海外							
□ Others 其他 ————————————————————————————————————								
Important Note 重要提示: If your information update, such a	s change of address or	telephone number ca	uses the country	/ countries and / or jur	risdiction(s) of tax			
residency previously identified being circumstances.								
若您的資料更新(如地址或電話號碼) 的自我證明。	導致之前確定的國家及 / !	或司法管轄區的稅務居民	是身份資料不正確或	不完整,您必須在改變後的	的30 天內提供最新			
17日3人成为1。								
Part III. Means of Commur	ication 第III部份	通訊方式						
Please indicate your selection of the season.  1. Change of your preferred language.			」號以表示選擇此服	務。				
選擇/更改日後通訊的語言	hinese 中文							
If preferred language is not selec 如沒有選擇,我們將會以中文與沒	ted, Chinese will be used for	or future correspondence	<b>)</b> .					
2. MPF Account Balance SMS Serv	ice (Remark 1, 2 and 3)							
強積金計劃戶口結餘短訊提示服務  New Application 首次申請				etails 更改聯絡資料				
Please provide your local mo 請於第II 部份提供您的本地引	<b>-</b> 提電話號碼。	r the purpose of providin	ng such service.					
Service Cancellation 服務取 I hereby confirm to cancel th	e MPF Account Balance S							
(Note注意: Cancellation shall ta 消。)								
3. Uption for receiving Relevant purposes of the Mandatory F be appropriate. (Remark 4)	rovident Fund Schemes C	Ordinance ("Relevant Co	ommunications")	in electronic form, as we	may determine to			
選取以電子形式收取有關通訊 訊(「有關通訊」)。(備註4) Remarks 備註	一 請於万格加上   ✔ 」號り	人问意我們以電子形式问您	送出(我們認為合意	<b>適的</b> )與「強制性公積金計	<b>劉條例」相關的迪</b>			
1. In the event that MPF accrued be account within the same plan al instructed. 假如一般僱員供款帳戶	l							
The figures will be calculated by	(另有指示除外)。  2. The figures will be calculated by using the fund price as at the last business day of previous month. Information on account balance is for reference only. 數額將根據上月最後一個工作天之基金價格計算。戶口結餘資料僅供參考。							
3. No SMS Account Balance will be provided if the accrued balance is less than \$1.00. 若戶口結餘少於\$1.00,將不會收到「帳戶結餘短訊」。 4. (i) By choosing this option, you agree to receive Relevant Communications in electronic form, as we may determine to be appropriate, so that, when We determine to issue to you a Relevant Communication in electronic form, we may not issue it to you in physical form, and vice versa. Relevant Communications refer to all documents, statements or notices issued by us for the purposes of the Mandatory Provident Fund Schemes Ordinance								
principal brochures, addenda	time, including, without limitation to principal brochures and fur [子形式接收(我們認為合適的) 是指我們按「強制性公積金計劃	nd performance fact sheets)	).					
表、成員通知、總說明書、總 (ii) Please note that wheth in electronic form only. Su	l說明書的補編及基金表現報告》 er or not this option is chosen, ich communications include,	communications not for the without limitation, semi-an	e purposes of the Ord	inance may, in any event, be	e issued by us to you			
請注意,不論您是否選擇此項 確認書、通訊、單張資料及宣		出非條例相關的通訊。此通	訊包括但不限於半年度					
including the email address	fectively made, please (on top and mobile phone number requ us at least 14 days prior notice	uired to be filled in above.	If you wish to update	your contact information for	electronic			
Form, or by calling our ĀMT 為了令此選項能夠有效實行,	O MPF Hotline at 2172 0909 (a 請(除剔選以上方格外)提供 少於14 天前透過我們的網站、	and the 14 days will start to 您的電子聯絡資料以作電子i	run from our actual re 通訊之用,包括於上方	eceipt of your request). 可填寫您的電郵地址和手提電記	活號碼。如果您想更			
(iv) Please note that the o	ption, when chosen, will apply where MPF accrued benefits							
personal account within the instructed. If you wish to ter	same plan after cessation of eminate the option, please give	employment, the option will us at least 14 days prior n	continue to apply to notice by submitting y	the new personal account u	ınless otherwise			
請注意,選擇此選項將適用於	mation Update Form (and the 上您在相同計劃下的所有帳戶,	包括所有現有和未來帳戶,」	並且為兔生疑問,此選	異項將繼續適用於您離職時在-				
更新表格」提交終止通知書(該	移到同一計劃內新的個人帳戶 14天將從我們收到您的終止指			少於14大則透過技們的網站、	<b>以父回填妥的</b>   資料			
☐ Service Cancellation 服務取》 I hereby confirm to cancel the		evant Communications in	electronic form. 本	人確認取消選取以電子形	式收取有關通訊。			

Part IV. Change of Contribution Mode (Only Applicable to Self-employed Person) 第IV部份 更改供款方式(只適用於自僱人士填寫)					
For Self-employed Person using Direct Debit Service only 只適用於使用直接付款方式之自僱人士					
The payment date is deemed to be 30 June of each year, or if specified, the day of June of each year.					
直接付款日期以每年6月30日為準,或指定每年6月的日。					
The payment date is deemed to be the last day of each month, or if specified, the day of each month.					
直接付款日期以每月之月底為準,或指定每月的日。					
Important Note 重要提示					
For monthly contribution, if 20th, 30th or 31st is selected, the Monthly Direct Debit Date will be the last day of each month. 加澤擇日代及每日之20日					

For monthly contribution, if 29<sup>th</sup>, 30<sup>th</sup> or 31<sup>st</sup> is selected, the Monthly Direct Debit Date will be the **last day of each month**. 如選擇月供及每月之29日30日或31日為直接付款日,「每月直接付款日期」將為每月最後一天。

If the direct debit day is a public holiday, Saturday, gale warning day or black rainstorm warning day, it will be the following business day. If the direct debit day falls on a Saturday which is also the last date of the month, it will be the preceding business day. 如直接付款日為公眾假期、星期六、烈風警告日或黑色暴雨警告日,則順延至隨後的工作天。如直接付款日為每月最後一天並為星期六,則提早一個工作天。

## Part V. Personal Information Collection Statement 第V部份 收集個人資料聲明

The personal data provided by or in respect of Members and Participating Employers of the AMTD MPF Scheme (the "Scheme") (concerning application records and operational records and / or their dealing / transaction details records) will only be accessed and handled by properly authorised staff of Bank Consortium Trust Company Limited ("BCTC", the trustee of the Scheme), the sponsor of the Scheme (currently orientient XYZ Securities Limited (formerly known as AMTD Global Markets Limited)("AMTD")) and their properly authorised service providers, employees, officers, directors and agents, and auditors of the Scheme, and may be used, disclosed and / or transferred (whether in or outside Hong Kong) to such persons as BCTC or any of its service providers may consider necessary, including governmental authorities and regulators, for any of the following purposes: (i) exercising or performing the functions conferred or imposed by or under or for the purposes of the Mandatory Provident Fund Schemes Ordinance ("Ordinance"); (ii) providing services in respect of Mandatory Provident Fund and the Scheme including the processing, administering, managing, and analysing of their, as the case may be, contributions, accrued benefits and portfolios and direct marketing of Mandatory Provident Fund services; (iii) improving the provision of Mandatory Provident Fund services by BCTC to customers generally (including the facilitation of the provision of Mandatory Provident Fund services to enable the customers of BCTC generally to access Mandatory Provident Fund (or other) account details, for example, through the internet or other means); (iv) compliance with applicable laws and regulations, and court order and / or (v) any other purposes for the exercise or performance of the above mentioned functions. If there is any change in the information provided, BCTC should be notified as soon as practicable. Failure to provide the information requested may result in BCTC being unable to process the instructions. All such information may be

Members and Participating Employers have a right, without any charge, to request access to and correction of any personal data or to request that personal data about them not be used for direct marketing purposes. Requests can be made in writing to the Data Protection Officer at BCTC, 18/ F Cosco Tower, 183 Queen's Road Central, Hong Kong. Under the Personal Data (Privacy) Ordinance, Members and Participating Employers have the right to obtain a copy of information held about Members and Participating Employers and for which the Members and Participating Employers may be charged a fee.

由AMTD 強積金計劃(「本計劃」)的成員及參與僱主所提供或相關之個人資料(有關申請及運作記錄)及/或他們的買賣/交易細節記錄僅供銀聯信託有限公司(「銀聯信託」,本計劃之受託人)、本計劃之保薦人(現為 orientiert XVZ Securities Limited(前稱尚乘環球市場有限公司)(「尚乘」)及它們正式授權之服務供應商、僱員、主任、董事及代理及本計劃之核數師使用及處理,及在銀聯信託或其任何服務供應商認為有需要時,或會被使用、披露及/或轉移(在香港境內或境外)予個別人士,包括政府機關及監管機構作以下列任何之目的: (一)行使或執行強制性公積金計劃條例(「條例」)下所授予或施加之職能或根據該條例的目的而行使或執行職能; (二)提供強制性公積金及本計劃的服務包括處理、掌管、管理及分析供款、累算權益及投資組合,視乎情況而定,及直銷強制性公積金服務; (三)改善銀聯信託提供予客戶一般之強制性公積金服務(包括協助提供強制性公積金服務以令銀聯信託之客戶可經例如互聯網或其他途徑處理強制性公積金(或其他)戶口資料);(四)遵守適用之法律及規例及法院命令及/或(五)任何以行使或執行上述職能作目的之用途。如所提供資料有所變更,應在可行的情況下儘快通知銀聯信託。未能提供所需資料可能導致銀聯信託不能處理有關指示。於成員及參與僱主停止參與本計劃後,受託人仍可保留上述所有資料。

成員及參與僱主,在不設任何收費下,有權要求查閱或更改任何個人資料或要求個人資料不被用作直銷之用。可以書面聯絡銀聯信託之資料保護主任 ,香港皇后大道中183 號中遠大廈18 樓。根據個人資料 (私隱)條例,成員及參與僱主有權在支付費用的情况下,索取一份有關成員及參與僱主的資料副本。

Ver.14-012020

## **Authorisation, Declaration and Consent** 第VI部份

By signing this document:

- (1) I understand and agree to the terms of the Personal Information Collection Statement as set out in this form.
- (2) I undertake that if there is any change in the information so provided, I shall notify BCTC and orientiert XYZ Securities Limited as soon as reasonably practicable.
- (3) I declare that to the best of my knowledge and belief, the information given in this form and / or its attachment(s), if any, is correct and complete.
- (4) I hereby agree to indemnify BCTC against any actions, proceedings, claims, losses, damages, costs or expenses which may be brought against BCTC or suffered or incurred by BCTC arising either directly out of or in connection with BCTC accepting facsimile instructions or e-mail instructions and acting thereon, whether or not the same are confirmed by me in writing. Notwithstanding the above, BCTC has the right to determine which forms or other documents of instructions may or may not be accepted by facsimile or e-mail.
- (5) I expressly consent to the use of my personal data (name, telephone no., fax no., e-mail address, address and account records) for the purpose of direct marketing of Mandatory Provident Fund Services (and ancillary MPF products) by BCTC and BCTF (or their employees or agents); but I understand that BCTC and BCTF cannot make such use of my personal data without my consent and will cease upon my written or verbal request. I further understand that if I do not wish to consent to my personal data being used for the said direct marketing purpose, I should indicate that no consent is given, by ticking this box.

經簽署本文件:

(1) 本人明白及同意於此表格之收集個人資料聲明條款。

Signature of Applicant 申請人簽署

- (2) 本人承諾若所提供之資料有任何更改,將儘快通知銀聯信託及 orientiert XYZ Securities Limited。
- (3) 本人聲明, 盡本人所知及所信, 本表格及隨附之文件(如有)所提供的資料均屬正確無訛且無缺漏。
- (4) 本人同意銀聯信託不論在有否得到本人的書面確認下均可接受及處理傳真指示或電郵指示及根據該等指示處理有關事宜,本人亦同意賠償銀聯信託 因接受或處理該等傳真指示或電郵指示而直接或間接導致銀聯信託遭受或承受的任何行動、訴訟、理賠、損失、損害、成本或費用。儘管以上所
- 述,銀聯信託有權決定何種表格或其他指示文件能否以傳真方式或電郵方式傳遞。 (5) 本人即明確表示同意銀聯信託及銀聯金融(及其僱員或代理)使用本人的個人資料(姓名、電話號碼、傳真號碼、電郵地址、地址及戶口記錄)作 直銷強制性公積金服務(及有關強積金的產品)的目的,但本人明白倘本人不同意銀聯信託及銀聯金融不能如此使用本人的個人資料及倘接獲本人 之書面或口頭要求,該使用將停止。本人亦明白如本人不欲將本人的個人資料用作上述直銷用途,本人應在末段的方格內加上"✓"號,以表示不 同意 。

Internal Use Only	內部專用			
Date Received:		Input By:	Verified By:	Remarks:

Date (D/M/Y) 日期(日/月/年)