### Manulife RetireChoice (MPF) Scheme

宏利退休精選(強積金)計劃



SID:

#### MEMBERSHIP ENROLMENT FORM (AND CRS SELF-CERTIFICATION) 成員登記表格(及共同匯報標準的自我證明)

#### Note 注意:

- Please fill in all the fields carefully. If the information is incomplete or incorrect, the enrolment, contribution or payment process may be delayed. 請小心填寫全部資料。如未能清楚填寫或錯誤地填寫資料,可能引致在處理有關登記、供款或支付權益時出現延誤。
- Please use blue or black ball pen and complete this Form in block letters. Please do not use correction fluid and all amendments should be signed. 請以藍色或黑色原子筆及正楷填寫此表格。請避免使用塗改液及任何刪改必須加簽。
- Should you have any questions when completing this Form, please feel free to contact Manulife MPF Members' Direct at 2298 9000. 如閣下於填表時有任何疑問,請致電宏利強積金成員專線2298 9000。

	<i>ropnate box. 請任適當的空格填上▼ 號)</i> 'sonal Information 第一節 - 個人資料	의 (Compulsory field 必填之欄)						
(to be comp	leted by Employee 請由僱員填寫)							
Name of Employer 僱主名稱 (English 英文)								
The Chinese University of Hong Kong								
Name of Employee (Must be identical to the one shown on your Hong Kong ID Card / Passport) 僱員姓名 (須與閣下之香港身份證 / 護照上的姓名相同)								
☐ Mr. 先生	Surname 姓	First Name 名						
□ Ms. 女士	Chinese Name 中文姓名	□ HKID Card No. 香港身份證號碼						
Date of Birth <sup>▼</sup> 出生日期 <sup>▼</sup>	(DD日MM月YYYY年)	□ Passport No. 護照號碼 (Only for person without HKID card 只適用於並未持有香港身份證之人士)						
Nationality 國籍								
Telephone No.	電話號碼 Country Code Area Code 國家號碼 地區號碼	Phone No.Ext.電話號碼內線						
Local Mobile z	x地手提							
Business 辦公	室							
Residential 住宅								
Fax No. 傳真號碼								
China / Overse	eas 中國 / 海外							
Email Address	* 電郵地址 *							
Country / Juri	sdiction of Tax Residency 稅務居民所在國家 /	司法管轄區						
Please put a "✔" in the following box as appropriate 如適用,請在下面的方格填上「✔」。								
I hereby declare that, to the best of my knowledge and belief 以本人所知及所信,在此聲明:								
My Tax Residence is 本人之稅務居住地為								
□ Hong Kong ONLY with no tax residence in any other jurisdictions or countries (and my HKID number is my Taxpayer Identification Number (TIN) as Hong Kong tax resident). 只有香港,及沒有處於任何其他司法管轄區或國家的稅務居住地(而本人的香港身份證號碼是本人作為香港稅務居民的稅務編號)。								
[If the box above does not apply, please proceed to Part IV which MUST be filled in for tax residence of either (a) Hong Kong and also some other jurisdictions or countries or (b) not Hong Kong, but instead some other jurisdictions or countries.  如果上面的方格不適用,請填寫第四節。該部份為稅務居住地是(甲)香港及其他司法管轄區或國家或(乙)不是香港而是其他司法管轄區或國家的稅務居民必須填寫的部份。]								
This Part I, particularly the personal information (including name, HKID card no., date of birth and address(es)) provided herein and the declaration regarding Country / Jurisdiction of Tax Residency, forms part of the "Self-Certification" referred to in Part IV. Please, in that regard, note the								

Important Notes stated in Part IV.

分。就此,請細閱第四節中的重要提示。

此第一節所提供的個人資料(包括姓名、香港身份證號碼、出生日期及地址)及稅務居民所在國家/司法管轄區聲明,及構成第四節「自我證明」的一部



Please provide one email address only. 請只填寫一個電郵地址。

The full and accurate Date of Birth provided is very important. If you select the Default Investment Strategy as your Investment Mandate, the Date of Birth will be used for calculating your age band with reference to the pre-set allocation percentages as shown in the DIS de-risking table for annual de-risking execution. 提供完整及準確的出生日期是非常重要。如選擇預設投資策略作為閣下的投資分配指示,閣下的出生日期將被用作計算閣下的年齡,並按照預設投資降低風險列表的分配百分比執行每年降 低風險安排。

Part I – Personal Information 第一節 – 個人資料 (Compulsory field 必填之欄) (Continued 續) (to be completed by Employee 請由僱員填寫)							
Residential Address <sup>#</sup> ("In-care-of" address and P.O. Box address will not be accepted. All correspondence will be sent to the following address.) 住址 <sup>#</sup> (「轉交」地址及郵政信箱恕不接受,所有通訊將寄往以下地址。)							
Flat / Room 室 Floor 樓	Block 座						
Building / Estate Name 大廈 / 屋苑名稱							
Street / Road 街道名稱	District 地區						
□ Hong Kong 香港 □ Kowloon 九龍 □ New Territories 新界	Overseas (Country and City) $^{ riangle}$ 海外(國家及城市) $^{ riangle}$						
	□ China 中國(City 城市) □ Others 其他 (Please specify請說明)						
▽ For overseas address 適用於海外地址	(Country國家)(City城市)						
# Under Section 91(2) of the Mandatory Provident Fund Schemes (General) Regulatio 按強制性公積金計劃(一般)規例第91(2)條,受託人必須紀錄每位成員的住址資料。	n, the Trustee is required to maintain a record of each member's residential address						
Part II – Means of Communication 第二節 – 通訊方式							
Please indicate your selection by ticking "✓" the box. 請在方格內加上「✓」號以表示選擇。							
Language for future correspondence 日後通訊的語言							
□ English 英文							
│							
If preferred language is not selected, English will be used for future correspo							
MPF Account Balance SMS Service (Remark 1) 強積金戶口結餘短訊提示							
Receive SMS notification of monthly MPF account balance (Remarks 2 and 透過第一節所提供之本地手提電話號碼收取每月強積金戶口結餘(備註2及3)							
□ Opt in 選擇							
□ Opt out 不選擇	_						
E-notification for MPF statutory communications 強積金法定通訊電子提							
Receive e-notification on communications requested by the Mandatory P suppress receiving hardcopies. 以電子提示形式收取按「強制性公積金計劃條例」要求的相關通訊(「有關通訊」)	,						
Statutory communications of your consent to suppress hardcopies 閣下同意 1. Addendum to MPF Scheme Brochure 強積金計劃說明書的補充文件 2. Notice to members and participating employers 致成員及參與僱主通 3. Member Benefit Statement 成員權益報表							
and any other communications may determine by the Trustee to be appropri	ate. (Remark 4) 及受託人認為合適的其他通訊。(備註 4)						
□ Opt in 選擇							

□ Opt out 不選擇

#### Part II – Means of Communication 第二節 – 通訊方式 (Continued 續)

#### Remarks 備註:

- 1. In the event that MPF accrued benefits (benefits) held under the regular employee contribution account are required to be automatically transferred to a new personal account within the same plan after cessation of employment, this value added service will continue to apply to the new personal account unless otherwise instructed. 假如一般僱員供款帳戶內之強積金累算權益(權益)在僱員終止受聘後需自動轉移至同一計劃下新開立之個人帳戶,此項增值服務亦適用於該新開立之個人帳戶(另有指示除外)。
- 2. The figures shall be calculated by reference to the fund prices 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 MPF 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 ("MPFSO") from time to time, including, without limitation, regulatory statements / notifications (such as member benefit statements, notices to members, MPF Scheme Brochure, Addenda to MPF Scheme Brochure and fund performance fact sheets). 選擇此選項即表示閣下同意以電子形式接收(我們認為合適的)有關通訊,因此,當我們決定以電子形式向閣下發出相關通訊, 友們可入以實物形式向閣下發出該相關通訊, 反之亦然。如有關通訊是指我們按「強制性公積金計劃條例」(「強積金條例」) 不時發出的所有文件、報表或通知,包括但不限於監管報表 / 通知(如成員權益報表、成員通知、強積金計劃說明書、強積金計劃說明書的補充文件及基金表現報告)。
  - (ii) Please note that whether or not this option is chosen, communications not for the purposes of the MPFSO may, in any event, be issued by us to you in electronic form only. Such communications include, without limitation, semi-annual benefit statements, switching for existing holdings confirmations, redirection for future contributions confirmation, newsletters, information leaflets and promotional materials. 請注意,不論閣下是否選擇此項,我們只會以電子形式向閣下發出非強積金條例相關的通訊。此通訊包括但不限於半年度成員權益報表、戶口結餘轉換確認書、未來供款投資指示確認書、通訊、單張資料及宣傳品。
  - (iii) For the option to be effectively made, please (on top of ticking the box above) provide your contact information for electronic communication, including the email address and mobile phone number required to be filled in above. If you wish to update your contact information for electronic communication, please give us at least 14 days prior notice by submitting your request through Manulife website, by returning the completed Change of Particulars for Member / Self-Employed Person Form, or by calling Manulife MPF Members' Direct at 2298 9000 (and the 14 days will start to run from our actual receipt of your request). 為了令此選項能夠有效實行,請(除剔選以上方格外)提供閣下的電子聯絡資料以作電子通訊之用,包括於上方填寫閣下的電郵地址和手提電話號碼。如果想更新閣下的電子聯絡資料,請在不少於14天前透過宏利網站、交回填妥的「更改成員 / 自僱人士資料表格」或致電宏利強積金成員專線 2298 9000 通知我們(該 14 天將從我們收到閣下的指示開始計算)。
  - (iv) Please note that the option, when chosen, will apply to all of your accounts under the same plan, including all existing and future accounts and, for the avoidance of doubt, where benefits held under a regular employee contribution account are automatically transferred to a new personal account within the same plan after cessation of employment, the option will continue to apply to the new personal account unless otherwise instructed. If you wish to terminate the option, please give us at least 14 days prior notice by submitting your termination notice through Manulife website or by returning the completed Change of Particulars for Member / Self-Employed Person Form (and the 14 days will start to run from our actual receipt of your termination notice). 請注意,選擇此選項將適用於閣下在相同計劃下的所有帳戶,包括所有現有和未來帳戶,並且為免生疑問,此選項將繼續適用於閣下離職時在一般僱員供款帳戶下持有的權益自動轉移到同一計劃內新的個人帳戶(另有指示除外)。如果閣下想終止此選項,請在不少於14天前透過宏利網站或交回填妥的「更改成員 / 自僱人士資料表格」提交終止通知書(該14天將從我們收到閣下的終止指示開始計算)。

(Please ✓ the appropriate box 請在適當空格填上 ✓ 號)  ☐ I would like to make Employee Voluntary Contributions to the Master Trust and hereby authorize my employer to deduct% of my salary for such purpose with effect from the 1st day of the month immediately following the 30th day of my participation in the Scheme, I agree that such Employee Voluntary Contribution instruction will apply even when my monthly relevant income falls below the minimum relevant income level. I understand that any arrangement for Employee Voluntary Contribution will be stopped upon cessation of employment with CUHK.  本人希望從參加此計劃首三十天後的第一個月首日起向此計劃作出僱員自願性供款並授權本人之僱主在支薪時從本人薪金中扣除	Part III – Employee Voluntary Contributions 第三節 – 僱員自願性供款
of my salary for such purpose with effect from the 1st day of the month immediately following the 30th day of my participation in the Scheme, I agree that such Employee Voluntary Contribution instruction will apply even when my monthly relevant income falls below the minimum relevant income level. I understand that any arrangement for Employee Voluntary Contribution will be stopped upon cessation of employment with CUHK.  本人希望從參加此計劃首三十天後的第一個月首日起向此計劃作出僱員自願性供款並授權本人之僱主在支薪時從本人薪金中扣除	Not Referring to the Employee Mandatory Contribution Portion 不同於僱員強制性部份 (Please ✔ the appropriate box 請在適當空格填上 ✔ 號 )
本人希望從參加此計劃首三十天後的第一個月首日起向此計劃作出僱員自願性供款並授權本人之僱主在支薪時從本人薪金中扣除	of my salary for such purpose with effect from the 1st day of the month immediately following the 30th day of my participation in the Scheme, I agree that such Employee Voluntary Contribution instruction will apply even when my monthly relevant income falls below the minimum relevant income level. I understand that any arrangement for Employee Voluntary Contribution will be stopped upon cessation of employment with
人終止聘用時停止。	本人希望從參加此計劃首三十天後的第一個月首日起向此計劃作出僱員自願性供款並授權本人之僱主在支薪時從本人薪金中扣除 

#### Part IV - Tax Residency Self-Certification 第四節 - 稅務居民身份自我證明

#### Important Notes 重要提示:

的稅務當局。

- This Part IV, together with other parts, sections and items of this form stated as such (including (a) those stated as such in Part I of this form and (b) the relevant parts, sections and items of Part VI below (including the relevant acknowledgment, undertaking and certification, and the signature section (and the warning underneath))), constitute the self-certification provided by you to Bank Consortium Trust Company Limited ("BCTC") for the purpose of Automatic Exchange of Financial Account Information ("AEOI") in compliance with tax law and regulations (including but not limited to the Inland Revenue Ordinance (Cap.112) and regulations based on the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard (CRS) for automatic exchange of information) ("Self-Certification"). The data collected may be transmitted by BCTC to the Inland Revenue Department for transfer to the tax authority of another country / jurisdiction.

  此第四節,與本表格內具有同樣闡述的其他部分、章節及項目(包括(a)本表格內第一節裏及(b)以下第六節裏的具有同樣闡述的那些部分、章節及項目(包括有關的確認、承諾及證明,及簽署的部分(和在其下的警告)))將構成閣下向銀聯信託有限公司(「銀聯信託」)提供的自我證明的部分,作
- This Self-Certification will remain valid unless there is any change in circumstances relating to your status of tax residency. You must notify BCTC within 30 days if there is any change in circumstances that makes any of the information provided in the Self-Certification incorrect or incomplete and provide an updated Self-Certification.

  除非閣下的稅務居民身份有任何改變,否則此自我證明將被視為有效。如情況有所改變,以致本自我證明所載的資料不正確或不完整,閣下必須在

為自動交換財務帳戶資料(「AEOI」)用途以遵守稅務法律及規例(包括但不限於《稅務條例》(第112章)和根據自動交換資料有關的經濟合作與發展組織(OECD)《共同匯報標準》(CRS)的規則)(「自我證明」)。銀聯信託可把收集所得的資料交給稅務局,稅務局會將資料交到另一國家 / 司法管轄區

改變後的30天內通知銀聯信託有關的改變並提供最新的自我證明。

- BCTC <u>MUST</u> obtain the complete and valid tax residency self-certification for the setting up of member record. To avoid any delay in the setting up of member record and contribution settlement (if any), please read and complete all the appropriate parts of this form (particularly those stated as forming parts of the Self-Certification). 銀聯信託在開立成員帳戶前,**必須**取得完整及有效的稅務居民身份自我證明。為避免成員帳戶開立及供款處理(如有)有任何延誤,請細閱並完成所有適用部分(尤其是那些將構成自我證明的部份)。
- All relevant identification / verification documentation for AEOI / CRS purposes should be provided to BCTC upon request. Failure to provide us with the information and other personal data as requested may result in your application / instruction not being able to be processed. 銀聯信託有權要求閣下提供就AEOI / CRS的目的所有相關的身份證明 / 驗證文件。如未能提供所需資料及其他個人資料,可能導致閣下的申請 / 指示不獲處理。
- As a financial institution, BCTC is not allowed to give tax or legal advice. If you have any questions regarding your tax residency, please consult your tax adviser or visit the OECD and Inland Revenue Department's AEOI website at <a href="http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/">http://www.ird.gov.hk/eng/tax/dta\_aeoi.htm</a> respectively, or simply scan the QR code, for more CRS and related information.

作為財務機構,銀聯信託不獲允許提供稅務或法律意見。若閣下對閣下的稅務居民身份存有任何疑問,請詢問專業稅務顧問或瀏覽OECD (http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/) 及稅務局(http://www.ird.gov.hk/chi/tax/dta\_aeoi.htm)有關AEOI的網頁,或掃瞄此二維碼,以獲取更多CRS及相關資料。





OECD

IRD (稅務局

#### Jurisdiction of Residence and Taxpayer Identification Number or its Functional Equivalent ("TIN") 居留司法管轄區及稅務編號或具有等同功能的識辨編號(以下簡稱「稅務編號」)

Please list all countries / jurisdictions (including Hong Kong (where applicable)) where you are a resident for tax purposes and Taxpayer Identification Number or its Functional Equivalent (TIN) for each country / jurisdiction. If the space provided is insufficient, please provide it in the below format on additional sheet(s).

請在以下列明閣下作為稅務居民的所有國家 / 司法管轄區(包括香港(如適用))及相關的稅務編號或具有等同功能的識辨編號(稅務編號)。如下列位置不敷應用,請按以下格式另加新頁。

Country / Jurisdiction of Tax Residency 稅務居民所在國家 / 司法管轄區		TIN Remarks 1 稅務編號 <sup>註1</sup>	If no TIN available, please indicate Reason A, B or C below <sup>Remarks 2</sup> 若未能提供稅務編號,請於下方填 上理由A、B 或C <sup>註2</sup>	Please explain why you are unable to obtain a TIN if you selected Reason B. 若閣下選擇理由B,請在下方解釋無法取得稅務編號的原因。	
1					
2					
3					
4					
5					

#### Remarks 註:

 If you are PRC Resident Identity Card holder, the TIN is the PRC Resident Identity Card Number. 若閣下是中華人民共和國居民身份證持有人,稅務編號為閣下中華人民共和國居民身份證號碼。
 If the account holder is a tax resident of Hong Kong, the TIN is the Hong Kong Identity Card Number.

如帳戶持有人是香港稅務居民,稅務編號是其香港身份證號碼。

2. Reason A — The country / jurisdiction where the account holder is a resident for tax purposes does not issue TINs to its residents.

理由 A — 帳戶持有人所屬的稅務居民的國家 / 司法管轄區沒有向其居民發出稅務編號。

Reason B — The account holder is unable to obtain a TIN. (Please explain why you are unable to obtain TIN in the above table if you have selected this reason.)

理由 B = 帳戶持有人無法獲得稅務編號。(若閣下選擇這理由,請在上表解釋閣下無法獲得稅務編號的原因。)

Reason C - No TIN is required. (Note: Only select this reason if the authorities of the relevant jurisdiction of residence does not require the TIN to be disclosed.)

理由C- 無需稅務編號。(註:只有在相關司法管轄區的主管機關不需要披露該司法管轄區發出的稅務編號方可選擇這理由。)

#### Part V - Investment Mandate 第五節 - 投資指示

Regular contributions and transfer-in asset (if any) shall be allocated for investment in the following manner: 定期供款及轉入資產(如適用)將按下列分配投資:

Name of Constituent Funds 成份基金名稱		Investment Allocation⁴ (Must be an integer) 投資分配⁴(必須為整數)		
		Mandatory Portion 強制性供款部份	Voluntary Portion (if applicable) 自願性供款部份(如適用)	
DIS	Default Investment Strategy 預設投資策略			
RBO	Allianz Hong Kong Fund 安聯香港基金			
RBU	Allianz Greater China Fund 安聯大中華基金			
RBI	Allianz Asian Fund 安聯亞洲基金			
RBT	Allianz Oriental Pacific Fund 安聯東方太平洋基金			
RBG	Allianz Growth Fund 安聯增長基金			
RBB	Allianz Balanced Fund 安聯均衡基金			
CAF	Allianz MPF Core Accumulation Fund (No automatic de-risking features) 安聯強積金核心累積基金(沒有自動降低投資風險特性)			
RBS	Allianz Stable Growth Fund 安聯穩定增長基金			
RBC	Allianz Capital Stable Fund 安聯穩定資本基金			
65F	Allianz MPF Age 65 Plus Fund (No automatic de-risking features) 安聯強積金65 歲後基金(沒有自動降低投資風險特性)			
RBR	Allianz Flexi Balanced Fund 安聯靈活均衡基金			
RBM	Allianz RMB Money Market Fund 安聯人民幣貨幣市場基金			
RBP	Allianz MPF Conservative Fund 安聯強積金保守基金			
Total &	·	100%	100%	

#### Note 注意:

- 1. The Investment Allocation specified above will apply in respect of the regular contributions paid by both you and your Employer and the transfer-in asset (if any). If the transfer-in asset is from another account under Manulife RetireChoice (MPF) Scheme (i.e. transfer within the same scheme), the fund allocation of such asset will remain unchanged until fund switching instruction is received from you. 閣下和閣下的僱主的定期供款及轉入資產(如適用)將同時以上述比重作投資。若轉入資產是由宏利退休精選(強積金)計劃的另一個帳戶轉入(即屬同一計劃內作出轉移),該筆資產的基金 分布將維持不變,直至閣下另行作出基金轉換指示為止。
- Please indicate your investment mandate for each of the Mandatory Portion and Voluntary Portion in the two columns provided above. Every portion can have an individual investment mandate. If you do not wish to choose an investment option, you do not have to do so, but if no investment mandate is specified in any portion, or if what is specified is not a valid investment mandate, (or is regarded to be not as a valid investment mandate), or if the completed enrolment form is not received, all future contributions or transfer-in asset to the respective portion will be 100% invested into the <u>Default Investment Strategy ("DIS")</u>. The DIS is not a fund; it is a strategy that uses two funds (i.e. Allianz MPF Core Accumulation Fund and Allianz MPF Age 65 Plus Fund) to manage investment risk exposure by automatically reducing the exposure to higher risk assets and correspondingly increasing the exposure to lower risk assets as you approach your retirement age. In general, the de-risking of investment in DIS will be automatically carried out each year on your birthday, when you are at the age from 50 to 64. For details, you may refer to the DIS information at www.manulife.com.hk. For your fund choice combination, you are free to choose to invest into the DIS and / or one or more constituent funds from the list above (including Allianz MPF Core Accumulation Fund and Allianz MPF Age 65 Plus Fund as standalone investments). If the 夏辽。原成及真亚不定,间及真蚕亚,间定,间还是他们用侧间及真蚕亚。即文种强慎亚伐心系慎蚕亚及文种强慎亚。60 版位蚕亚/云目建设真风域的原 略。它會在閣下接近退休年齡前自動減持高風險的資產及增持低風險的資產。預設投資的降低投資風險安排—脫會在閣下50 至64 歲間,每年的生日 當天執行。詳情可參照於www.manulife.com.hk的預設投資資訊。於閣下的基金選擇組合內,閣下可自由選擇投資於預設投資及/或上列一個或多個成份基金(包括作為單獨投資的安聯強積金核心累積基金及安聯強積金65 歲後基金)。若收到閣下的計劃成員登記表格時,受託人已將收到的定期供 款及轉入資產(如適用)全數投資於預設投資內,表格所提供的投資分配指示將只會用於日後作出的供款及轉入資產(如適用)。
- If neither you nor your employer has elected to make any Voluntary Contribution, you are not required to specify an Investment Allocation for the Voluntary Portion in the above table. 若閣下或閣下的僱主將不會作出任何自願性供款,閣下毋須在上表提供自願性供款部分的投資分配指示。
  - If you and / or your employer subsequently elect to make Voluntary Contribution, you will have to provide the Trustee with a new Investment Allocation in using the Change of Voluntary Contribution For Member / Self-Employed Person Form and Redirection for Future Contributions / Switching for Existing Holdings Form for such Voluntary Contribution separately. 如閣下及 / 或閣下的僱主於日後作出自願性供款,閣下必須填寫成員 / 自僱人士更改自願性供款表格及未來供款投資指示 / 戶口結餘轉換表格為該自願性供款重新提供投資分配指示。
- A valid Investment Mandate for either the Mandatory Portion or the Voluntary Portion must be such that (a) each Investment Allocation Percentage is specified as an integer, i.e. a whole number, of at least 1%, and (b) all of the Investment Allocation Percentages add up to 100% in total. If an Investment Mandate does not comply with such requirements including, but not limited to cases where any Investment Allocation Percentage is specified not as an integer of at least 1% or all of the Investment Allocation Percentages add up to more than 100% in total, the Investment Mandate will be regarded as invalid. Where what has been specified is regarded as an invalid investment mandate, all future contributions or transfer-in asset to the respective portion will be 100% invested into the DIS. If all of the Investment Allocation Percentages add up to less than 100% in total, you to the respective portion will be 100% invested into the DIS. If all of the Investment Allocation Percentages add up to less than 100% in total, you would be regarded as not having given a valid Investment Mandate in respect of the shortfall, and the contributions / assets corresponding to such shortfall will be invested into the DIS. 強制性供款部份及自願性供款部份的有效投資分配指示必須為(a)每個投資分配指示的百分比須至少1%的整數(即完整的數目)表示,及(b)全部投資分配指示的百分比總和等於100%。若投資分配指示並未符合上述要求,包括但不限於任何投資分配指示的百分比並不是至少1%的整數或全部投資分配指示的百分比總和超過100%,則該投資分配指示將被視作無效。若指定的投資分配指示被視作為並非有效的投資分配指示,該供款部份日後的所有供款或轉入資產,將100%投資於預設投資。若全部投資分配指示的百分比總和少於100%,閣下將被視作未就差額部份作出有效的投資分配指示,相當於差額部份的供款/資產將被投資到預設投資。

#### Part VI - Authorisation, Declaration and Consent 第六節 - 授權、聲明及同意

#### To be Completed by The Employee 由成員填寫

- All information in this Form is accurate. 此表格所載資料均屬正確無訛。
- I undertake to notify the Trustee as soon as possible of any changes to the information contained in this Form. 本人承諾如此表格所載資料有任 何更改,將盡早通知受託人。
- I understand that the Trustee may not be able to process this application if I fail to provide any information requested in this Form. 本人明白倘若 本人未能提供此表格所需的資料,受託人將可能無法處理有關申請。
- I confirm that I have received and read the latest MPF Scheme Brochure (and any Addenda thereto) of the Master Trust and accept and agree to be bound by the terms of such MPF Scheme Brochure (and Addenda thereto), the Trust Deed constituting the Master Trust, the governing rules prescribed by the Trustee in respect of the Master Trust and notified to the Employee from time to time as well as this Form. 本人確認已收納及 閱讀此計劃最新之強積金計劃說明書(及其附錄),並同意接受及遵守該強積金計劃說明書(及其附錄),成立此計劃之信託契據,受託人就此計劃訂 明並不時通告僱員之計劃細則和此表格。
- 5. I understand that in the absence of gross negligence, fraud or bad faith, the Trustee will not be liable for any delay in processing my enrolment and intended contributions, any discrepancy between my intended investment allocation as set out under Part V above and the allocation actually used for my contributions, and any other loss, cost or liability whatsoever related to my membership in the Master Trust. 本人明白在沒有重大過 失、欺詐或惡信的情況下,受託人將不會負責有關處理本人參加此計劃或供款之延誤、真正的投資分配與本部第五節不同、及任何其他與本人參與 此計劃有關的損失、費用或責任。
- I hereby agree to indemnify the Trustee against any actions, proceedings, claims, losses, damages, costs or expenses which may be brought against the Trustee or suffered or incurred by the Trustee arising either directly out of or in connection with the Trustee accepting facsimile instructions or e-mail instructions and acting thereon, whether or not the same are confirmed by me in writing. 本人同意就受託人因直接或間接接 受傳真指示或電郵指示及根據指示處理有關事宜,並因此(不論經吾等書面確認與否)而可能面對或蒙受或招致之任何訴訟、法律程序、索償、損 失、損毀、費用或開支而向受託人作出免責保証。
  - Notwithstanding the previous paragraph, the Trustee has the right to determine which Forms or other documents of instructions may or may not be accepted by facsimile or e-mail. 儘管有上段之規定,受託人有權決定可以或不可以接受經傳真或電郵之表格或其他指示文件。
- If applicable, I acknowledge and agree that my full benefit entitlement under the ORSO registered scheme of which I was formerly a member ("Former Scheme") is being transferred to the Manulife RetireChoice (MPF) Scheme as an initial voluntary contribution balance and is in full satisfaction of my entitlement under the Former Scheme, irrespective of the terms of the Former Scheme. 如適用,不論前註冊職業退休計劃(前 計劃)之條文,本人認知及同意轉移本人於前計劃中之所有利益至宏利退休精選(強積金)計劃作為初期自願性供款並滿意前計劃中所得的利益。
- I acknowledge and agree that (a) the information contained in the parts of this form constituting the Self-Certification is collected and may be kept by BCTC for the purpose of AEOI, and (b) such information and information regarding the account holder and any reportable account(s) may be reported by BCTC to the Inland Revenue Department of the Government of the Hong Kong Special Administrative Region and exchanged with the tax authorities of another country / countries and / or jurisdiction(s) in which the account holder may be resident for tax purposes pursuant to the legal provisions for exchange of financial account information provided under the Inland Revenue Ordinance (Cap.112), and (c) I agree to the obligation that the account holder must comply with requests made by BCTC to comply with the CRS (AEOI) requirements under the Inland Revenue Ordinance and / or applicable law and regulation, and such obligation forms the basis of the account to be opened. 本人確認及同意, 銀聯信託可根據《稅務條例》(第112章)有關交換財務帳戶資料的法律條文,(a)收集本表格構成自我證明的部份所載資料並可備存作AEOI用途及 (b)把該等資料和關於帳戶持有人及任何須申報帳戶的資料向香港特別行政區政府稅務局申報。從而把資料轉交到帳戶持有人的國家及/或司法管轄區的稅務當局及(c)本人同意帳戶持有人必須遵守銀聯信託的要求以便遵守《稅務條例》及/或適用法律及規例的CRS (AEOI)規定,並為日後開立 帳戶之基礎
- I undertake to advise BCTC of any change in circumstances which affects the tax residency status of the individual identified in the parts of this form constituting the Self-Certification or causes the information contained herein to become incorrect or incomplete, and to provide BCTC with a suitably updated Self-Certification within 30 days of such change in circumstances. 本人承諾,如情況有所改變,以致影響本表格構成自我證明 的部份所述的個人的稅務居民身份,或引致本自我證明所載的資料不正確或不完整,本人會通知銀聯信託,並會在情況發生改變後30日內,向銀 -份已適當更新的自我證明表格。
- 10. I certify that I am the account holder of all the account(s) to which this form relates and / or currently held with BCTC (if any). 本人證明,就與本 表格所有相關的帳戶及 / 或現於銀聯信託持有的帳戶(如有),本人是帳戶持有人。
- 11. I agree that the personal data provided by or in respect of Members and Participating Employers of the Master Trust (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 ("BCT", the trustee of the Master Trust), Manulife (International) Limited, ("Sponsor", the sponsor of the Master Trust) and their properly authorised service providers, employees, officers, directors and agents, and auditors of the Master Trust, and may be used, disclosed and / or transferred (whether in or outside Hong Kong) to such persons as BCT, the Sponsor or any of their service providers may consider necessary, including governmental authorities and regulators, and my employer, for any of the following purposes: (i) exercising or performing the functions conferred or imposed by or under or for the purposes of the MPFSO; (ii) providing services in respect of Mandatory Provident Fund and the Master Trust including the processing, administering, managing, and analysing of their, as the case may be, contributions, benefits and portfolios and (where consent or indication of no objection has been obtained) direct marketing of Mandatory Provident Fund services; (iii) improving the provision of Mandatory Provident Fund services by BCT to customers generally (including the facilitation of the provision of Mandatory Provident Fund services to enable the customers of BCT 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, BCT should be notified as soon as practicable. Failure to provide the information requested may result in BCT being unable to process the instructions. All such information may be retained after I have ceased to participate in the Master Trust to the extent permitted by law.

Members and Participating Employers have a right 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 BCT, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong. Under the Personal Data (Privacy) Ordinance Remark 1 I have the right to obtain a copy of information held about myself and for which I may be charged a fee.

本人同意由此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」,此計劃之受託人)、宏利人壽保險(國際)有限公司(「保薦人」,此計劃之保薦人)及它們正式授權之服務供應商、僱員、主任、董事及代理 及此計劃之核數師使用及處理,及在銀聯信託、保薦人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和僱主作以下列任何之目的:(一)行使或執行強積金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)提供發表企及此計劃的服務包括處理、掌管、管理及外析供款、權益及投資組合、視乎情況而足。(名明教院於於根據院院) 之用 途。如所提供資料有所變更,本人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。於法例容 許範圍下,在本人終止參與此計劃後,所有資料或被保留。

成員及參與僱主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<sup>備註1</sup>本人有權在支付費用的情況下,索取一份有關本人個人資料的副本。

## Part VI – Authorisation, Declaration and Consent 第六節 – 授權、聲明及同意 (Continued You are entitled under the Personal Data (Privacy) Ordinance to be informed by Bank Consortium Trust Company Limited whether it holds Personal Data about you and to request access to and / or correction of any such Personal Data. Any such request may be in writing to the Data Protection Officer at Bank Consortium Trust Company Limited, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong. 借註1 按個人資料(私隱)條例,閣下有權要求銀聯信託有限公司提供是否持有閣下的個人資料,或要求接觸和 / 或更改任何個人資料。 此類要求,可以書面形式向資 料保護主任查詢。請郵寄香港皇后大道中 183 號中遠大廈 18樓,銀聯信託有限公司資料保護主任收。 12. Personal Information Collection Statement: The Sponsor and Investment Manager, Manulife (International) Limited, would like to use your personal data (name, residential address, email address and telephone number) collected from you for providing information and direct marketing of products and services relating to Mandatory Provident Fund Schemes offered by itself or by its subsidiaries or associates with the Manulife Group of companies. The Sponsor may not use your personal data without your consent for the above purpose. Should you find such use of your personal data not acceptable, please indicate your objection before signing by ticking the box below: I lobject to the proposed use of my personal data for direct marketing purposes as stated above. 個人資料收集聲明: 保薦人宏利人壽保險(國際)有限公司擬將收集所得有關閣下的個人資料(姓名、住址、電郵及電話號碼)用作提供其本身或宏利集團附屬或聯營 公司所提供有關強制性公積金計劃的產品與服務的資訊以及為該產品與服務作直銷用途。 未經閣下同意,保薦人不得使用閣下的個人資料作上述用途。 倘若閣下不接受將閣下的個人資料作上述用途,請於下列空格內填上「✔」號以示不同意,然後簽署本表格: 本人不同意將本人的個人資料作上述直接促銷用途。 Date 日期 Signature of Employee 僱員簽署 (This signature will also act as a specimen signature for future correspondences. 日後有關此計劃之簽署,將以此簽署式樣為準。) WARNING: It is an offence under section 80(2E) of the Inland Revenue Ordinance if any person, in making a Self-Certification, makes a statement that is misleading, false or incorrect in a material particular AND knows, or is reckless as to whether, the statement is misleading, false or incorrect in a material particular. A person who commits the offence is liable on conviction to a fine at level 3 (i.e. HK\$10,000). 警告: 根據《稅務條例》第80(2E)條,如任何人在作出自我證明時,在明知一項陳述在要項上屬具誤導性、虛假或不正確,或罔顧一項陳述是否在要項 上屬具誤導性、虛假或不正確下,作出該項陳述 ,即屬犯罪。一經定罪,可處第3級(即HK\$10,000)罰款。 Latest MPF Scheme Brochure is available on www.manulife.com.hk or by calling Manulife MPF Members' Direct on 2298 9000. 最新強積金計劃說明書可於 www.manulife.com.hk下載或致電宏利強積金成員專線2298 9000索取 BCT use only Document Received Inputted By: Checked By: Remarks: 銀聯信託專用: Date:

Date Checked:

Date Inputted:

Please return this form to the following address:

# Payroll & Superannuation Unit 3/F Sui Loong Pao Building The Chinese University of Hong Kong

請將此表格交回下列地址:

薪津及公積金組 香港中文大學兆龍樓3樓