



**Note 注意**

- Please mark "✓" in the appropriate box. 請於適用的方格內填上「✓」號。
- Please provide **ALL** the required information and send the completed form to "Pension Services, Bank Consortium Trust Company Limited, 18/F Cosco Tower, 183 Queen's Road Central, Hong Kong". 請提供所有所需資料並將填妥表格寄往「香港皇后大道中183號中遠大廈18樓，銀聯信託有限公司，退休金服務」收。

**Important Notes 重要提示**

- Please read the MPF Scheme Brochure (and any addendum thereto) for BCT (MPF) Pro Choice / BCT (MPF) Industry Choice carefully before completing this payment note.  
填寫此繳付供款提示前，請先細閱BCT 積金之選 / BCT(強積金) 行業計劃強積金計劃說明書及任何其附錄的條款。
- Please note that you will be required to provide evidence required by applicable laws and regulations relating to anti-money laundering checks. If BCTC / BCTF does not receive satisfactory evidence, further documentation may be requested, and shall not be processed until such documentation is received. BCTC reserves the right not to accept the special voluntary contribution and / or the captioned application.  
請注意，您須就現行打擊清洗黑錢的有關法例及規則的要求而提供證明。倘若銀聯信託 / 銀聯金融未能收到滿意之證明，則可要求提供進一步資料，而有關交易謹在接獲有關資料後方可進行。銀聯信託保留不接受特別自願性供款及 / 或上述之申請。
- Fund units will be purchased according to your current investment instruction.  
基金單位將按您現行之投資指示作出認購。
- Fund units will be purchased after cheque clearing.  
銀聯信託將於支票兌現後，才能辦理基金單位之認購。
- Payee name - a) For BCT (MPF) Pro Choice, please write "Bank Consortium Trust Company Limited - Client A/C - Master Clearing"  
b) For BCT (MPF) Industry Choice, please write "Bank Consortium Trust Company Limited - Client A/C - Industry Clearing"  
支票抬頭 - a) 如為BCT 積金之選，請寫上「銀聯信託有限公司 – BCT 積金之選」  
b) 如為BCT(強積金)行業計劃，請寫上「銀聯信託有限公司 – BCT(強積金)行業計劃」
- Please make contribution by your own crossed personal cheque and write down your name and HKID card number at the back of the cheque. Do not send us cash or pay by cash / bank-in the cheque at our designated bank branches as it would delay the processing time.  
請以您的個人劃線支票及於支票背面寫上您的名稱及身份證號碼作出供款。請勿郵寄現金或於我們的特定銀行分行遞交現金 / 存入支票，此舉將會延遲處理有關供款的時間。

Name of Plan 計劃名稱	<input type="checkbox"/> <b>BCT (MPF) Pro Choice BCT 積金之選</b>	Participating Plan No. 參與計劃編號
	<input type="checkbox"/> <b>BCT (MPF) Industry Choice BCT(強積金)行業計劃</b>	
Name of Member 成員姓名	English (Mr / Ms / Mrs*)	HKID Card No. 香港身份證號碼
	中文 (先生 / 女士 / 太太*)	Passport No. ( <i>ONLY</i> for member without HKID Card) 護照號碼 (本欄僅供沒有香港身份證的成員填寫)
Occupation 職業		Job Title 職稱
Contribution Amount 供款金額	HK\$ _____ 港元 (not less than HK\$500 不少於500港元)	Cheque No. 支票號碼
<p>The source of funds for captioned application is from 上述申請的資金來源是從：</p> <p><input type="checkbox"/> Salary 薪金                      <input type="checkbox"/> Personal savings 個人存款                      <input type="checkbox"/> Inheritance 遺產</p> <p><input type="checkbox"/> Sale of property 出售物業                      <input type="checkbox"/> Investment return 投資回報                      <input type="checkbox"/> Investment matured 已到期的投資產品</p> <p><input type="checkbox"/> [Others — please specify 其他 — 請說明: _____].</p>		

\* Delete as appropriate 請刪去不適用者

**Personal Information Collection Statement 收集個人資料聲明**

The personal data provided by or in respect of Members and Participating Employers of the BCT (MPF) Pro Choice and / or the BCT (MPF) Industry Choice (collectively referred as the "Schemes") (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 Schemes), BCT Financial Limited ("BCTF", the sponsor of the Schemes) and their properly authorised service providers and agents, 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 Mandatory Provident Fund services 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 (and ancillary MPF products); (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 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.

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.

由BCT積金之選及 / 或BCT(強積金)行業計劃(統稱為「強積金計劃」)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」, 強積金計劃之受託人)、銀聯金融有限公司(「銀聯金融」, 強積金計劃之保薦人)及它們正式授權之服務供應商及代理之正式授權之職員使用及處理, 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(及有關強積金的產品); (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於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, 請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。

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。請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。

I understand and agree to the terms of the Personal Information Collection Statement as set out in this form. 本人明白及同意於此表格之收集個人資料聲明條款。

\_\_\_\_\_  
Signature of Member 成員簽署

\_\_\_\_\_  
Date (D / M / Y) 日期(日 / 月 / 年)

Please submit this note together with a cheque to Bank Consortium Trust Company Limited directly.  
請將此表格連同支票, 直接交予銀聯信託有限公司。

**Internal Use Only 內部專用**

Date Received:	Input By:	Verified By:	Remarks:
Broker Code:	Agent Code:	Campaign Code:	BD Code: