



香港家庭醫學學院 The Hong Kong College of Family Physicians

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APPLICATION FORM FOR NON-HKSAR MEMBERSHIP

(Ver. 1 Dec 2023)

PERSONAL PARTICULARS: (* Items are Mandatory)

Name in English*: _____
(Surname first, Block Letters, Please)

Name in Chinese: _____ Gender*: _____

I.D. Card / Passport No. of your country*: _____
(Please circle)

Date of Birth*: ____/____/____
DD MM YYYY

Address of Practice: (English) _____
(Chinese) _____

Nature of Practice: Private / Others (please specify): _____

Practice Telephone No.: _____ Home Telephone No.: _____

Mobile Phone No.*: _____ Fax No.: _____

E-mail Address*: _____

Correspondence Address*:

English (Mandatory): _____

Chinese: _____

DEGREES AND OTHER QUOTABLE QUALIFICATIONS:

(As approved by the Hong Kong Medical Council)

Qualification	Date Obtained	Granting Authority

REGISTRATION: (Please attached a certified copy of your registration document)

Registration Authorities	Registration Number	Date of Full Registration
Medical Council (Country)		

CURRENT APOINTMENTS/PRACTICE:

(Please include details such as specialty, type of practices, name of supervising consultant, if any)

PARTICULARS OF ACADEMIC ACHIEVEMENTS:

Research: _____

Publications, including theses and prize essays: _____

Experience in teaching: _____

Scholarship and prizes: _____

PARTICULARS OF MEMBERSHIP OF MEDICAL OR RELATED ORGANIZATIONS:

Please indicate in details the following if applicable:

- (i) Previous criminal record or current criminal investigation in any jurisdiction.
- (ii) Previous medical council disciplinary record or equivalent in any jurisdiction.
- (iii) Current medical disciplinary investigation or proceedings in any jurisdiction.

I desire to become a Non-HKSAR Member of the Hong Kong College of Family Physicians, and I hereby give an undertaking that, on admission to the Hong Kong College of Family Physicians, I will:-

- (i) uphold and promote to the best of my ability the aims and objectives of the College;
- (ii) observe and comply with the provisions of the Articles of Association and such Regulations and Bye-laws of the College as may from time to time be in force; and
- (iii) undertake and continue approved post-graduate study while I remain a member of the College.

I declare that:-

- (i) I have not practised in Hong Kong SAR for more than one year;
- (ii) I undertake to inform the College as soon as I resume remunerative medical practice in Hong Kong SAR; and
- (iii) I will keep the College updated with my address for correspondence.

I hereby enclose a cheque of HK\$400.00 being annual subscription fee for the year _____.

For those newly-joined applications received between 1st July and 31st December 2024 (according to postal mark), the pro-rata annual subscription fee is HK\$200.00 for year 2024.

I consent the Hong Kong College of Family Physicians (HKCFP) using, holding, storing and disclosing my personal data for all academic and administrative purposes under HKCFP's Personal Data (Privacy) Policy which is accessible at www.hkcfp.org.hk.

I have the responsibility to report my discipline issue to the HKCFP in written by email to membership@hkcfp.org.hk or fax at +852 2866 0616 within ONE month of the final judgement.

I consent supporting the "Go Green" initiative by receiving all issues of Family Physicians Links (FP Links) in electronic versions from HKCFP's website at http://www.hkcfp.org.hk/fplinks_40.html. Members who would like to receive printed copies of FP Links, please send email to FPLinks@hkcfp.org.hk.

Date: _____ Signature: _____

Please return this form to: The Hon. Secretary, The Hong Kong College of Family Physicians, Rm803-804, HKAM Jockey Club Bldg., 99 Wong Chuk Hang Road, Aberdeen, Hong Kong with:

- 2 passport size photos
- a cheque for your subscription fee payable to “**The Hong Kong College of Family Physicians**” which will be returned in case of unsuccessful application
- a copy of your graduation certificate
- a copy of your country ID Card or Passport
- a copy of your country medical registration certificate

Note:

Apart from the membership application form, please **DO NOT** send any original certificates/ documents to the College Secretariat and these originals would not be kept in our record.

For Official Use Only

Annual Subscription for the year _____ HK\$ _____ paid

Recommended/Not recommended by Membership Committee

Signed: _____ Date: _____
Membership Committee

Approved by the Council on _____



The Hong Kong College of Family Physicians Personal Data (Privacy) Policy

(Ver. 19 May 2017)

The **Personal Data (Privacy) Ordinance** 個人資料(私隱)條例 contains provisions dealing with the purpose and manner of collection of personal data; accuracy and duration of retention of personal data; use of personal data; security of personal data; and access to personal data.

This statement sets out the College's policies relating to the collection and use of personal data in accordance with the Personal Data (Privacy) Ordinance.

1. Your personal data is important to us

The College recognizes that your privacy is important. We know that providing personal data is an act of trust and we take that seriously. The College is committed to protecting the privacy of our individual members. All practicable steps will be taken to ensure that your personal data are protected against unauthorized or accidental access, processing or erasure.

2. Collecting personal data about you

If you are a College member, we collect personal data about you in order to provide you with the full benefits of Membership. We collect information from you directly when you become a member and also from time to time thereafter when you provide us additional information.

3. Using and disclosing your personal data

Your personal data will be used solely for purposes relating to functions and activities conducted by the various Boards and Committees of our College. Without your consent, the College will not disclose any information to third parties, unless:

- we are authorized by law.
- we believe it (is) necessary to provide you with a service that you have requested.
- we act to implement our terms of use.
- we act to protect the rights or property of the College, any College user, or any member of the public.
- we act for the purpose of prevention or detection of crime.
- we act to prevent or lessen a serious harm to a person's health or safety.

4. Storage and security of your personal information

Once you are a member, we maintain a record of the status of your membership and a history of your transactions with the College. For those who have ceased their membership with our College, their data will be removed from our active databank. A certain portion of information may be retained in our main data bank if we anticipate their potential use in the near future.

The College will endeavor to take all reasonable steps to keep secure any personal data which we hold, process, circulate and transmit, and keep this data accurate and up to date. Your information is stored on secure servers and protected in controlled facilities. Guidelines from the Boards and Committees are provided to their members, and instructions given to our secretariat staff, regarding personal data security control. In addition, the contractors who provide services related to our information systems are obliged to respect the confidentiality of any personal information held by the College. However, the College will not be held responsible for events arising from unauthorized access to your personal information. Please notify us immediately if there is any suspected event of unauthorized use of your personal data or breach of security.

5. Information access and correction

Subject to exemptions under the Personal Data (Privacy) Ordinance, you have the right of access and correction of your personal data. Request should be addressed in writing to our College Secretariat. We will respond to your request within 40 days. A nominal fee may be charged to cover the administrative cost.

6. Promotional Mail

For your benefits we may send you on occasion promotional information about the College or other related information. If you do not wish to receive this information any longer, you may ask us to remove your name from our list by writing to us. Please allow 2 weeks for this request to be processed.

The College will notify you in case of future change of its privacy policy. Should you have further queries or any difficulties, please contact us. For more information on the Personal Data (Privacy) Ordinance, please visit the website of the Office of the Privacy Commissioner for Personal Data at <http://www.pcpd.org.hk/>.