

APPLICATION FORM

Please complete and return to the Membership Secretary:

Ms. Theresa Mak
18/F., Golden Centre
188 Des Voeux Road Central
Hong Kong

Tel: 2302 0832

Fax: 2736 6266

E-mail: membership@hkitmp.org

cc: tmak@rouse.com



*The Hong Kong
Institute of Trade
Mark Practitioners*

All Applicants are required to complete and submit this form to the Membership Secretary at the above address, duly counter-signed by a Sponsor, who must be an Ordinary Member of the Institute, verifying that you are known to the Sponsor to be practising as stated in this Application Form, and that they believe the contents to be accurate.

Personal Details

Name _____

Address _____

Telephone _____

Fax _____

E-mail (Mandatory) _____

Academic Qualifications

Professional Qualifications

Current Employment Details

Current employer

Number of years

Position and nature of work

Details of past employments



(1)

Employer _____

Position and nature of work

Number of years

(2)

Employer _____

Position and nature of work

Number of years

Experience in trade mark matters

To assist us in obtaining a balanced picture of the nature of your work and experience, please give us an indication of the **approximate** number of cases of the following types that you have personally handled or dealt with over the last two years.

	<u>In Hong Kong</u>	<u>Outside Hong Kong</u>
New applications filed	_____	_____
Written submissions to the Registry	_____	_____
Ex parte Hearings and informal interviews	_____	_____
Inter partes Hearings	_____	_____
Notices of Opposition (filed or replied to)	_____	_____



Rectification or invalidation (filed or replied to) _____
Litigation & Enforcement matters _____
Licensing and Assignment matters _____

Please note that there are no “minimum numbers” expected of Applicants and the above information is requested solely to give us a fair indication of the nature and size of your practice to allow us to judge whether your experience is consistent with our membership requirements.

Any other relevant experience (for example other IP experience)

Do you or your firm have a professional liability indemnity insurance policy : YES/NO and would you be willing to produce a copy of the same to the Council for inspection, on request : YES/NO (please delete as appropriate)

I wish to apply to join the Institute as (please delete as appropriate) an:

- Ordinary member under Article 7 sub-clause ___ (please check the Institute website for relevant sub-clause number)
- Student member
- Overseas member
- Affiliate

and agree that upon acceptance I shall pay the current annual subscription fees of HK\$1,000 (Ordinary members, Overseas members and Affiliates)/HK\$100 (Student members) and I shall abide by [the Memorandum and Articles of Association](#) of the Institute.

Date _____ Applicant's Signature _____

I hereby confirm that the above Applicant has been known to me for ____ (insert period, months/years). This Application Form has been presented to me duly completed, signed and dated by the Applicant. I believe that the Applicant is practising as stated in this Application, and I have no reason to doubt the accuracy of any of the contents. I am pleased to support the application.

Date _____ Sponsor's Signature _____ Name of Sponsor _____

The information requested is required for the purposes of considering your application to join The Hong Kong Institute of Trade Mark Practitioners. If you do not supply the information requested we may be unable to process your application. The information will be provided to all members of the Council of the Institute to allow them to consider your application and selected information may on occasion be made available to other members. The information will be stored in the records of the Institute in the form that is provided on this application form and the only information that will be transcribed into another format is that relating to current address and contact details which may be included on the Institute website. If you have any questions concerning the data held by the Institute you are encouraged to contact the Membership Secretary. Please also advise us if there is any information on this application that you prefer to remain confidential and if you do not want your name and contact details to appear in the Institute membership list.

The Hong Kong Institute of Trade Mark Practitioners Limited is committed to respecting and protecting the privacy of its members. You may view our updated Personal Information Collection Statement on the Institute's website <http://www.hkitmp.org/>.