

Manu-Lifestyle (MPF) Scheme Employee Enrolment Form
宏利寫意生活(強積金)計劃僱員參加表格



Notes :

- (1) **THIS FORM MUST BE ISSUED IN CONJUNCTION WITH THE OFFERING DOCUMENT. PLEASE READ IT CAREFULLY BEFORE COMPLETING THIS FORM. PLEASE ASK YOUR MANULIFE MPF INTERMEDIARY FOR THE OFFERING DOCUMENT IF YOU DO NOT HAVE ONE.**
- (2) Please complete this form in BLOCK LETTERS and tick the appropriate boxes.
- (3) Please initial next to any corrections you make on this form.
- (4) Information items provided under Part A to E are collected to enable our company to manage and update member particulars for the purpose of administering the Scheme. You are required to supply the information under these Parts and failure to do so may result in your enrolment being delayed.
- (5) It is voluntary for you to supply the information items under Part F.
- (6) By writing to the customer service department of your scheme administrator, you can correct and have access to your personal data. You can also choose not to receive any marketing materials and request for destructions of any optional information supplied.
- (7) Membership termination by the trustee or by the member can be effected in accordance with section 4.10 of the Offering Document.

注意事項：

- (1) 本表格須連同銷售文件一併發出。填寫本表格前，請細閱該文件。如閣下沒有該文件，請向本公司之強積金中介人索取。
- (2) 請用正楷填寫本表格，並在適當空格內加✓號。
- (3) 如須作出任何刪改，請於刪改之位置旁簽署。
- (4) 本公司於收集A至E部分之資料之目的在於處理及更新成員資料以便管理計劃。敬請提供此部分之資料，否則閣下參加計劃之申請或會因此而延誤。
- (5) 閣下可自行決定是否提供F部分資料。
- (6) 閣下可以書面向計劃管理人之客戶服務部更改及查閱閣下之個人資料，閣下亦有權拒絕接收任何宣傳推廣資料，及要求銷毀任何已提供之非必要資料。
- (7) 受託人或成員可根據銷售文件第4.10章所述終止有關成員帳戶。

(1) Employer (Company) Name: 僱主(公司)名稱	(3) Member Account No. (if Applicable): 成員帳戶號碼 (如適用)
(2) Sub-Scheme No. (Not Applicable at Sub-Scheme Inception): 附屬計劃編號 (並不適用於新成立附屬計劃)	(3) Member Account No. (if Applicable): 成員帳戶號碼 (如適用)

A. Personal Information (Must be verified by the Employer)
個人資料 (必須由僱主核實)

- (1) Name: (as shown on HKID Card / Passport)
姓名 (必須與香港身份證/護照相同)

Surname in English 英文姓氏 Other Name in English 英文名字 Name in Chinese 中文姓名

- (2) Date of Birth :
出生日期 dd 日 / mm 月 / yyyy 年
- (3) Date of Employment :
受僱日期 dd 日 / mm 月 / yyyy 年

- (4) Sex : M 男 F 女
- (5) HKID No. : _____ (_____)
香港身份證號碼
- Passport No. : _____
護照號碼
(ONLY for person without HKID Card 只供沒有香港身份證的人士填寫)

- (6) Residential Address : (all correspondence will be sent to the following address)
住址 (所有通訊將寄往以下地址)

Room / Flat 室 Floor 樓 Block 座 Name of Building 大廈名稱

Name of Estate 屋苑名稱 Street No. / Street Name 街道號碼 / 街道名稱

District 區域 H.K. 香港 KLN. 九龍 N.T. 新界 Others 其他 _____

The contact information applies to all of your existing products / services in Hong Kong and Macau provided by all companies within the Manulife group of companies and also companies which provide trustee / custodian services.

閣下所提供的聯絡資料，適用於閣下現時持有並由宏利集團旗下公司，以及為本公司提供信託 / 託管服務的於香港及澳門所提供的產品 / 服務上。

To apply above address to this member account only, please "✓" this box. 如以上地址只適用於此成員帳戶，請在方格內填上「✓」號。

- (7) Business Tel. No. : _____
公司電話號碼
- (8) Extension : _____
內線
- (9) Fax No. (if any) : _____
傳真號碼 (如有)
- (10) Residential Tel. No. : _____
住宅電話號碼
- (11) Mobile Phone No. : _____
手提電話號碼
- (12) Email Address (if any) : _____
電郵地址(如有)

For office use only 職員專用: ID



B. Investment Choice (Contribution Investment Instruction) 投資選擇 (供款投資指示)

Fund Name 基金名稱	Fund Account Code 基金代號	Allocation of Mandatory Contribution 強制性供款分配率	Allocation of Voluntary Contribution 自願性供款分配率
Manulife MPF Interest Fund 宏利 MPF 利息基金	DHK121	%	%
Manulife MPF Stable Fund 宏利 MPF 穩健基金	SHK122	%	%
Manulife MPF Growth Fund 宏利 MPF 增長基金	SHK123	%	%
Manulife MPF Aggressive Fund 宏利 MPF 進取基金	SHK124	%	%
Manulife MPF Conservative Fund 宏利 MPF 保守基金	SHK125	%	%
Manulife MPF 2015 Retirement Fund* 宏利 MPF 2015 退休基金*	SHK138	%	%
Manulife MPF 2020 Retirement Fund* 宏利 MPF 2020 退休基金*	SHK139	%	%
Manulife MPF 2025 Retirement Fund* 宏利 MPF 2025 退休基金*	SHK140	%	%
Manulife MPF 2030 Retirement Fund* 宏利 MPF 2030 退休基金*	SHK141	%	%
Manulife MPF 2035 Retirement Fund* 宏利 MPF 2035 退休基金*	SHK142	%	%
Manulife MPF 2040 Retirement Fund* 宏利 MPF 2040 退休基金*	SHK143	%	%
Manulife MPF 2045 Retirement Fund* 宏利 MPF 2045 退休基金*	SHK144	%	%
Total 合共		100 %	100 %

A minimum of 5% (whole numbers) is required for each selected fund. The contribution percentages must add up to 100%. Please fill in the "Allocation of Voluntary Contribution" column irrespective of whether you have any voluntary contributions for the time being. All voluntary contribution set up now or in future will be invested in accordance with this allocation instruction or any "Allocation of Voluntary Contribution" instructions given in future.

In the event of invalid, unclear or incomplete instructions including amendments which are not properly initialed:

- all mandatory contributions will be invested in the Manulife MPF Interest Fund until completion of the processing of any further Contribution Investment Instructions received by Manulife.
- all voluntary contributions will be invested in accordance with the "Allocation of Mandatory Contribution" instructions in the Contribution Investment Instructions given at the time when the member record was set up.

每項所選之基金之最低分配率為百分之五(必須為整數)。供款分配率之總和必須等於百分之一百。不論閣下有否自願性供款，仍請填寫「自願性供款分配率」一欄，宏利將會依據此欄的指示或任何將來作出的「自願性供款分配率」的指示對現在或將來的自願性供款進行投資分配。

如沒有註明供款分配率，或其註明指示不清晰、不符合規定，包括於刪改處沒有簽署作實，則：

- 所有強制性供款將會全數投資於宏利MPF利息基金，直至宏利接獲並完成處理閣下的進一步供款投資指示。
- 所有自願性供款將根據設立成員記錄時所作的供款投資指示內的強制性供款分配率進行投資分配。

Accrued benefits transferred from accounts of another MPF scheme for mandatory contributions will be treated as mandatory contributions whereas accrued benefit transferred from accounts of another MPF scheme for voluntary contributions will be treated as voluntary contributions. Accrued benefit transferred from your last registered Occupational Retirement Scheme to this MPF scheme will be treated as voluntary contributions whereas any minimum MPF benefit transferred from your last registered Occupational Retirement Scheme will be treated as mandatory contributions.

閣下的前強積金計劃之強制性供款累算權益將被轉移至此計劃的強制性供款部份內，而前強積金計劃之自願性供款累積權益則將被轉移至此計劃的自願性供款部份內。閣下的前註冊職業退休計劃轉移至此強積金計劃的累算權益將被視作自願性供款，但其中的任何最低強積金利益則被視作強制性供款。

* The Manulife MPF 2015 Retirement Fund, the Manulife MPF 2020 Retirement Fund, the Manulife MPF 2025 Retirement Fund, the Manulife MPF 2030 Retirement Fund, the Manulife MPF 2035 Retirement Fund, the Manulife MPF 2040 Retirement Fund and the Manulife MPF 2045 Retirement Fund will close on their maturity dates as defined in the Offering Document. Details on any special procedures in handling contribution investment instructions or other instructions to subscribe or redeem units of these funds due to fund maturity can be found in the latest Offering Document.

* 宏利MPF2015退休基金、宏利MPF2020退休基金、宏利MPF2025退休基金、宏利MPF2030退休基金、宏利MPF2035退休基金、宏利MPF2040退休基金及宏利MPF2045退休基金將於銷售文件內所定義的期滿日結束，請參閱最新的銷售文件以了解因基金期滿就處理該等基金的供款投資指示、或其他認購或贖回單位的特別程序。

C. Declaration 聲明

It is hereby DECLARED, UNDERSTOOD AND AGREED that

While being a member of the scheme, I shall be bound by the provisions of the Master Trust Deed and its Rules.

I have read all the notes on this form. All information supplied hereunder together with any subsequent alterations thereof will be accurate and can be transferred to any of your delegates, service providers or designated MPF Intermediaries (whether they are located within or outside the Hong Kong Special Administrative Region) to assist your Company in the administration services. The scheme administrator will be authorized to collect any updated information from me.

The Mandatory Provident Fund Schemes Authority and other regulatory bodies in any jurisdictions shall be authorized to inspect any of my information under the scheme.

All information on this form may be used for the purpose of enabling your Company / associated companies to supply product / service information to me, through intermediaries, direct marketing or otherwise, subject to the applicable law and regulation, including the Mandatory Provident Fund Schemes Ordinance.

I hereby authorize my employer to obtain from me any updated information and / or any additional information that are reasonably required by your Company to administer the Sub-Scheme and to provide the same to your Company to enable your Company to administer the Sub-Scheme. The said information may be treated by your Company in the same manner as those mentioned above in this Enrolment Form.

My employer may from time to time agree with me in respect of any changes and your Company is hereby authorized to accept any instruction given by my employer to update / amend the governing rules (including but not limited to any change in vesting scale) and / or to terminate the participation in the scheme and/or to transfer any accrued benefit to another provident fund scheme provider.

I undertake that if there is any change in the information provided, I shall notify your Company as soon as reasonably practicable.

I understand that I should seek professional advice from a qualified investment consultant before making any investment decision. I hereby declare that the investment decision indicated hereinabove in Part B has been reached as a result of my own independent judgement and opinion.

本人明白，同意並謹此聲明：

本人作為計劃成員，將受集成信託契約之規定及條例所管限。

本人已閱讀本表格之所有注意事項。本人於本表格內提供之資料及其後之修訂均正確無誤，並可供轉移予任何位於香港特別行政區及以外地區的受委託者、服務提供者或受委任之強積金中介人，以協助貴公司提供管理服務。計劃管理人亦將獲授權向本人收集更新資料。

強制性公積金計劃管理局及任何司法管轄區的其他監管團體將獲授權查看計劃內任何本人之資料。

貴公司/聯營公司可使用本人於本表格上所提供之資料，以便透過中介人、直接推廣或以其他方式向本人提供產品/服務資訊。有關資料的使用將受適用法律及條例所規範，包括強制性公積金計劃條例。

本人謹此授權僱主向本人索取或更新提供之資料及/或已提交予貴公司因管理附屬計劃而須取得之額外資料，並向貴公司提供該等資料以便貴公司管理附屬計劃。貴公司可按本表格所述，處理有關資料。

本人與僱主可以不時同意作出任何更改，及貴公司已獲授權接受本人之僱主所給予的任何指示以更新/修正管限規則(包括但不限於歸屬比例的變更)及/或終止參與計劃及/或轉移累算權益至另一公積金計劃提供機構。

本人承諾假使所提供的資料有任何更改，本人將於合理的切實可行範圍內盡快通知貴公司有關於之改動。

本人明白本人在作出任何投資決定前，須先向合資格投資顧問尋求專業建議。本人特此聲明於B部分之投資決定，乃出於本人之獨立判斷及意見。

Employee's Signature 僱員簽署

(This signature shall also act as a specimen signature for future correspondence.
日後有關本計劃之簽署，將以此簽署樣式為準。)

Date 日期

D. Flexi Retirement Contribution 自選退休供款

The Manu-Lifestyle (MPF) Scheme provides facility for members to make Flexi Retirement Contribution (FRC) on voluntary basis. To help you choose the contribution type which is suitable for you, please refer to the Offering Document for details of the FRC account operation.

宏利寫意生活(強積金)計劃提供途徑供成員以自願性質的形式作出自選退休供款。為使閣下選用合適的供款方式以切合需要，請參閱銷售文件以了解自選退休供款的帳戶運作詳情。

To set up an independent account for making additional voluntary contribution, please ensure that you have checked the box below.
如欲成立獨立的帳戶以額外作出自願性供款，請確保已「✓」以下的方格：

- Yes, I have completed the "Application for Participation in Manu-Lifestyle (MPF) Scheme (Flexi Retirement Contribution Member)" form.
是，本人已填妥「宏利寫意生活(強積金)計劃申請表格(自選退休供款成員)」。

E. Transfer of Accrued Benefits Only 轉移累算權益專用

To transfer your MPF accrued benefit from other scheme to Manulife, please ensure that you have checked the box below.
如欲由其他計劃轉移強積金累算權益至宏利，請確保已「✓」以下的方格：

- I want to transfer my MPF accrued benefits from other scheme to Manulife. Please send the "Election Form for Transfer of Accrued Benefits" to me.
本人欲從其他計劃轉移強積金累算權益至宏利，請寄付「累算權益轉移表格」給本人。

Name of service provider(s) of previous scheme(s) 前計劃的服務提供者名稱：

(1) _____

(2) _____

Remarks: If you have already submitted application for transfer of accrued benefits, you do not need to complete this section again.
註：如閣下經已遞交轉移累算權益之申請，則無須再次填寫本部份。

F. Optional Information 其他資料 (此項資料並非必要)

- | | | |
|---|--|---|
| <p>1. <u>Education Level 教育程度</u></p> <p><input type="checkbox"/> 1 Primary 小學</p> <p><input type="checkbox"/> 2 Secondary 中學</p> <p><input type="checkbox"/> 6 Matriculated / Post Secondary 預科 / 專科</p> <p><input type="checkbox"/> 3 Technical Institute 工業學院</p> <p><input type="checkbox"/> 7 College 專上學院</p> <p><input type="checkbox"/> 4 University or above 大學或以上</p> | <p>2. <u>Job Position 職位</u></p> <p><input type="checkbox"/> 2 Manager / Executive 經理 / 行政人員</p> <p><input type="checkbox"/> 1 Professional 專業人士</p> <p><input type="checkbox"/> 3 Sales Service 推銷員 / 服務員</p> <p><input type="checkbox"/> 5 Clerks / Secretary 文書 / 秘書</p> <p><input type="checkbox"/> 4 Technician / Worker 技術員 / 工人</p> | <p>3. <u>Marital Status 婚姻狀況</u></p> <p><input type="checkbox"/> 1 Single 單身</p> <p><input type="checkbox"/> 2 Married 已婚</p> |
|---|--|---|

Are you holding the following products or services?
你有否擁有下列產品或享用下列服務？

- | | |
|--|--|
| <p>4. <u>Individual Insurance 個人保險</u></p> <p><input type="checkbox"/> 01 Life 人壽保險</p> <p><input type="checkbox"/> 06 Disability Insurance 傷殘保險</p> <p><input type="checkbox"/> 07 Hospital / Medical 住院 / 醫療保險</p> | <p>5. <u>Investment Products 投資產品</u></p> <p><input type="checkbox"/> 80 Stock Investment 股票投資</p> <p><input type="checkbox"/> 81 Mutual Funds 互惠基金</p> <p><input type="checkbox"/> 82 Fixed Deposits 定期存款</p> |
|--|--|

G. To Be Completed By Employer
此欄由僱主填寫

- (1) Member Category 成員類別: 1 / 2 / 3 / _____
(only applicable for Sub-Schemes with different categories of voluntary contributions 只適用於有不同類別自願性供款之附屬計劃)
- (2) Payroll Frequency 支薪期
(If there is only 1 type of payroll frequency in your Sub-Schemes which also applies to this employee, please ignore this item.
如貴公司的附屬計劃只有一種支薪期並適用於此僱員，閣下毋須填寫此欄。)

Monthly 每月

Twice a month 每月兩次

Every two weeks 每兩星期

Weekly 每星期

Others 其他 _____

Payroll Period 每次支薪所包括之工作日期

From _____ to _____
自第 _____ 日至第 _____ 日

1st 第一期: From _____ to _____
自第 _____ 日至第 _____ 日

2nd 第二期: From _____ to _____
自第 _____ 日至第 _____ 日

starting day: Monday Tuesday Wednesday Thursday Friday Saturday Sunday
支薪期首日 星期一 星期二 星期三 星期四 星期五 星期六 星期日

- (3) Tick the appropriate box below if the employee is one of the categories indicated
如僱員屬於任何以下類別，請在適當之空格內加"✓"號
- Casual employee 臨時僱員 (Y)
- Exempt person under Schedule 1 to the MPF Schemes Ordinance 強制性公積金計劃條例附表1上註明之獲豁免人士(E)
(Employer should inform Manulife by written notice when this employee is no longer an exempt person 當此僱員不再屬於獲豁免人士時，僱主須書面通知宏利)

I / We declare that I / we have verified the identification information of the applicant on this application form against the proper identification documents including the Hong Kong Identity Card issued by the government authority in accordance with the Registration of Persons Ordinance. In case the employee's signature is not provided under Part C, I / we declare that the information under Part A to F is supplied by the Employer on behalf of the employee where I am / we are not able to obtain employee's signature for timely submission of this application in compliance with statutory requirements and shall indemnify Manulife or its associated companies for all damages incurred by Manulife in reliance on the information provided. Manulife shall proceed to set up the member record accordingly, and all contributions will be invested into Manulife MPF Interest Fund.

本人 / 本人等聲明本人 / 本人等已核對此表格上的申請人載於合法身份證明文件內的資料，身份證明文件包括由政府機關依人事登記條例發出的香港身份證。如本表格之C部份並未載有僱員的簽署，而本人 / 本人等未能按法例要求依時取得僱員簽署，而代表僱員填寫A至F部份的僱員資料，則本人 / 本人等須為宏利及其聯營公司因相信 / 使用此資料而導致的任何損失負上其賠償責任。宏利亦將相應為成員設立記錄，而所有供款將投資於宏利MPF利息基金。

Authorized Signature and Company Chop
獲授權人士簽署及公司印章

Name & Title (in Block Letters)
姓名及職銜 (正楷)

Date
日期

Completed form should be sent to the scheme administrator,

"Provident Funds Services, Manulife (International) Limited, 21/F., Tower A, Manulife Financial Centre, 223 - 231 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong".
請將填妥的表格寄交計劃管理人「香港九龍觀塘偉業街223 - 231號宏利金融中心A座21樓宏利人壽保險(國際)有限公司公積金服務部」。