

Please complete all items in BLOCK letters with a blue or black pen.

Please insert a ✓ in the appropriate box. There is 1 page.

(1) Particulars of Corporate/Organization

Identity (Corporate ID[by staff] : _____)

Name of

Corporate/Organization

Chinese

English*

Department

Industry*

Mailing Address*

☐ Hong Kong Island☐ Kowloon☐ New Territories**Contact Person**

District

Name in Chinese

Name in English*

Surname

First Name

Title*

☐ Mr☐ Mrs☐ Miss

Post/Title:

Contact Phone No.*

Corporate/Organization

Telephone No.

Other Telephone No.

Fax No.

E-mail Address

(2) Applied Course Information

Course Name

Class Code(if any)

Course

Exam Date

Commencement Date

(3) Payment

Total HK\$

Payment

\$ 100

Attach herewith

☐

Cash (For submit in person only, please do not mail cash)

☐

Cheque (Bank: _____; Cheque no.: _____)

Note:

- Please submit your application by completing the **application form together with a crossed cheque** (Payable to: Hong Kong Red Cross), to Headquarters Office by post. Please indicate "Application for Mailing Service of Result/Certificate" on envelope.
- It will be sent by registered mail within 2 weeks after the release of examination result or certificate issued or HKRC received the application form (whichever is later).
- HKRC will not be responsible for any loss caused by delay in postal or unsuccessful delivery; and the collected fee is non-refundable.

(4) Statement

I on behalf of the above mentioned corporate/organization state that I have read and agree with the Application Notes, Terms & Conditions and the Guideline on Use of Personal Data (Privacy) of Hong Kong Red Cross.

Corporate/Organization's Chop

Signature : _____

Name : _____

Date : _____

For Office Use ONLYApply result: ☐ Approved ☐ Rejected, reason: _____

Receipt No.: _____

Internal Transfer/Refund: _____

Account Audit: _____

Please fill in the following information

Name: _____

Address: _____

Name: _____

Address: _____