

如需遞交填妥表格 When submitting this form:
請緊記簽署此表格 Please ensure that you have signed this form
請勿重複遞交相同表格 Please do NOT send duplicate copies

Notes:

- The changes filled in this form will supersede any previous information / form(s) which has/have been submitted to the Administrator.
本表格所列之更改將取代所有其他之前已遞交行政管理人的資料/表格。
- All sections below should be completed in English and in BLOCK letters except the Chinese name of the Member.
除了成員的中文名稱外，所有部份須以英文正楷填寫。
- For Self-employed Person, please complete the "Self-employed Person Information Change Form"
如屬自僱人士，請填寫「自僱人士資料更改表格」。

**SUN LIFE RAINBOW MPF SCHEME
MEMBER INFORMATION CHANGE FORM
永明彩虹強積金計劃
成員資料更改表格**

Part I Personal Details 第一部份 個人資料

Member Name
成員姓名

Membership Number
成員編號

Telephone No.
電話號碼

HKID/Passport No.
香港身份證/護照號碼

Part II Update Personal Record(Only Complete Relevant Sections) 第二部份 更新個人記錄 (只需填上適用部份)

(Please put a tick✓ in the appropriate box 請在適當的方格上填上✓號)

Change of Contact 更改聯絡資料

New Residential Address (P.O. Box will not be accepted)
新住址(郵政信箱恕不受理)

New Correspondence Address 新通訊地址
(if different from the residential address) (如與住址不同)

New Telephone No.
新電話號碼

Home
住宅

Mobile Phone/ Pager
手提電話/傳呼機

Fax No.
傳真號碼

New Email Address
新電郵地址

Change of Name or Signature Specimen 更改姓名或簽署式樣

Name 姓名 (English 英文)

(same in HKID / Passport
與香港身份證 / 護照上的相同)

(Surname 姓)

(Given Names 名)

Name 姓名 (Chinese 中文)

(same in HKID / Passport
與香港身份證 / 護照上的相同)

(Surname 姓)

(Given Names 名)

Title Mr/Ms/Miss/Others*

稱銜 先生/女士/小姐/其他*

* Please delete whichever is inappropriate 請刪除不適用者

For change of name to be registered in our records you must:

- Attach a copy of the Marriage Certificate and your new Hong Kong Identity Card; or
- Attach a copy of the Deed Poll and your new Hong Kong Identity Card

若需要更改登記於計劃內的姓名，你需要：

- 附上結婚證書及新身份證之副本；或
- 附上改名契及新身份證之副本

New Signature Specimen

新簽署式樣

New signature specimen should be approved by existing
signature under the Administrator's record.

新簽署式樣應由與行政管理人紀錄相符之現簽署核准

Other Changes 其他更改(Please specify 請列明)

Part III Declaration 第三部份 聲明

I, the Member, hereby confirm that the above details and the attached information (if any) are true and correct. I agree that all above information:-

- will be used for (i) the administration of my contributions and accrued benefits under Sun Life Rainbow MPF Scheme; (ii) conducting direct marketing activities of the Trustee or its associated companies; (iii) compliance with the applicable laws and regulations; and (iv) any other purposes related to the above;
- may be made available to other third parties which the Trustee considers appropriate; and
- is provided on a voluntary basis and failure to supply information may result in the Trustee being unable to process the change(s) requested/submitted in this form.

I can obtain access to and request correction of any of my personal information by writing to the Manager, Pensions Administration Department, BestServe Financial Limited.

本人(作為成員身份)謹此確定以上細則/或附上之資料(如有)皆為真實正確。本人同意以上所有資料:

- 應被用於(i)永明彩虹強積金計劃下的本人的供款和累算權益的行政事宜和管理;(ii)進行信託人或其相聯公司的直接市場推廣活動;(iii)遵守適用法律和規例;及(iv)與上述有關的任何其他用途;
- 可提供給受託人認為適當的任何第三者;及
- 是本人以自願性質向受託人提供的。但是，未能提供資料可能導致受託人不能處理本申請。

本人有權查閱並且要求更正受託人所持有的本人個人資料。如要求查閱，可通過書面方式向卓譽金融服務有限公司退休金管理部經理提出。

Signature of Member 成員簽署

Signature of Member 成員簽署

Date 日期(dd/mm/yyyy年)

請簽署
Please Sign Here

Please send the completed form to: Sun Life Rainbow MPF Scheme, The Administrator, BestServe Financial Limited
22/F, China Resources Building, 26 Harbour Road, Wanchai, Hong Kong Tel 3183 1888 Fax 3183 1889

請將填妥表格交予: 永明彩虹強積金計劃行政管理人-卓譽金融服務有限公司
香港灣仔港灣道 26 號華潤大廈 22 樓 電話 3183 1888 傳真 3183 1889

Please do NOT send in this form twice; if faxing form, please keep the hard copy for your records.
請勿重複遞交相同表格; 如透過傳真遞交表格, 請保留正本以作記錄。

