



# INTERNATIONAL PROFESSIONAL SECURITY ASSOCIATION

國際專業保安協會(香港)有限公司 (HONG KONG) LTD

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## 公司會員申請表 APPLICATION FOR CORPORATE MEMBERSHIP

- (1) Please complete in block letters and in ball pen.  
(2) The information provided will be used for processing of your membership and other purposes relating to your membership. Information on unsuccessful applicants will be destroyed as soon as notice has been served on the applicants concerned.  
(3) Please ensure that all parts in the form are completed and the information is accurate.

### TYPES OF MEMBERSHIP APPLIED FOR

- MANNED GUARDING (MG)**  
(please complete all sections)
- SECURITY SYSTEMS (SS)**  
(please complete all sections)
- SECURITY CONSULTANCY (SC)**  
Individual security consultants and companies which supply a security service other than "MG" and "SS".  
(please complete sections A and D)
- AFFILIATED COMPANY (AC)**  
Companies/organisations which employ their own in-house security staff or organizations which are involved in activities associated with the security profession.  
(please complete sections A and D)

### SECTION A. DETAILS OF COMPANY / ORGANISATION

Name of Company / Organisation \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_ Website \_\_\_\_\_

Company / Business Registration No. \_\_\_\_\_

Date commenced business / operation \_\_\_\_\_

Nature of business / operation \_\_\_\_\_

Has there been a change in trading title? Yes / No

If yes, give details \_\_\_\_\_

Is the Company / Organisation making the application part of, or a subsidiary of any other Company / Organisation? Yes / No

If yes, please give details \_\_\_\_\_

Has the Company / Organisation made an application for membership of this Association before?

Yes / No If yes, when? \_\_\_\_\_

### - Office Use -

Region \_\_\_\_\_

Mem. No. \_\_\_\_\_

Special Code \_\_\_\_\_

Check (a) \_\_\_\_\_

Subs \_\_\_\_\_

Post \_\_\_\_\_

Cert \_\_\_\_\_

TOTAL \_\_\_\_\_

Insurance \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Search \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Inspector \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ACKN \_\_\_\_\_

**DETAILS OF ALL EXECUTIVE DIRECTORS / PARTNERS / PROPRIETORS**

- 1. Full Name \_\_\_\_\_ Mr.\*/Mrs.\*/Miss\*/Ms.\* Position Held \_\_\_\_\_
- 2. Full Name \_\_\_\_\_ Mr.\*/Mrs.\*/Miss\*/Ms.\* Position Held \_\_\_\_\_
- 3. Full Name \_\_\_\_\_ Mr.\*/Mrs.\*/Miss\*/Ms.\* Position Held \_\_\_\_\_
- 4. Full Name \_\_\_\_\_ Mr.\*/Mrs.\*/Miss\*/Ms.\* Position Held \_\_\_\_\_
- 5. Full Name \_\_\_\_\_ Mr.\*/Mrs.\*/Miss\*/Ms.\* Position Held \_\_\_\_\_

**TRAINING**

Name and Qualification of Trainer

\_\_\_\_\_

\_\_\_\_\_

Training of Employees (full details of Training Policy)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DETAILS OF PERSON APPLYING FOR THE COMPANY / ORGANISATION**

English Name \_\_\_\_\_ Mr.\*/Mrs.\*/Miss\*/Ms.\* Name in Chinese \_\_\_\_\_

Position Held \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_

Office Tel \_\_\_\_\_ Office Fax \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

Home Tel \_\_\_\_\_ Home Fax \_\_\_\_\_

Mobile \_\_\_\_\_ Pager \_\_\_\_\_

E-mail Address \_\_\_\_\_

Length of service with security profession \_\_\_\_\_

Are you an Individual Member of IPSA(HK) Ltd? Yes / No

If yes, give Membership No. \_\_\_\_\_

Have you been convicted of any offence? Yes / No

**SECTION B. INSURANCE REQUIREMENTS**

Name and Address of Insurers (as on Policy) \_\_\_\_\_

\_\_\_\_\_

Date of Insurance Renewal \_\_\_\_\_ Policy Number \_\_\_\_\_

The Association’s minimum requirements for Companies offering a guarding service are as under:

- 1. Employers Liability Insurance in accordance with current statute
- 2. Public Liability Insurance (Third party)  
Policy must be extended to include:
  - a) Liability for property that you are guarding, including vehicles

- b) Liability to and of sub-contractors if necessary
- c) Use of guard dogs if necessary
- d) Principal's indemnity

3. Efficacy / Contractual Liability Insurance

4. Fidelity Guarantee – Cover to include both employers and clients property

For Companies operating Cash in Transit facilities:-

5. Cash Insurance – Policy to be on a full liability basis if Cash in Transit work undertaken

Additionally members are strongly recommended to consider the following Insurances and details should be supplied where appropriate.

- a) Professional Indemnity – for Consultancy work
- b) Wrongful Arrest – for shop detectives / retail security
- c) Libel and Slander – for investigations and reporting
- d) Personal Accident to cover employees against loss of earnings through disability
- e) Products Liability for installation work

If your insurer, insurance broker or solicitor advises that any of the requirements are unnecessary for your business, then written confirmation of that advice is required.

6. Motor Insurance – all vehicles to be insured in accordance with local statute

Name and Address of Motor Insurers (if different from above) \_\_\_\_\_

Date of Insurance Renewal \_\_\_\_\_ Policy Number \_\_\_\_\_

### SECTION C. LICENCE REQUIREMENTS

Applicants are required to provide IPSA(HK) Ltd with the under-mentioned documentation and sign the declaration below:

1. A copy of their current licence issued by the Hong Kong Security and Guarding Services Industry Authority.
2. Written confirmation from their insurers, that the company has a minimum of 5 Million Hong Kong Dollars public liability insurance cover.
3. Written confirmation from their insurers that the company has Employees' Compensation insurance cover in accordance with the Hong Kong Employees' Compensation Ordinance, Cap. 282.

I confirm that (Name of Company) \_\_\_\_\_

is currently licenced by the Hong Kong Security and Guarding Services Industry Authority. The company employs:

\_\_\_\_\_ (the number of Administrative and Clerical employees)

\_\_\_\_\_ (the number of all other employees)

I/we, understand that company membership of IPSA(HK) Ltd, is dependent upon the company continuing to be licenced by the Hong Kong Security and Guarding Services Industry Authority and having public liability and employees compensation insurance as described above. I/we, undertake to inform IPSA(HK) Ltd immediately, if our company ceases to be licened by the Security and Guarding Services Industry Authority and or, the company ceases to have insurance cover as described above.

Signed \_\_\_\_\_ Full Name (in capitals) \_\_\_\_\_

Date \_\_\_\_\_ Position with company \_\_\_\_\_

## SECTION D. PAYMENT AND DECLARATION

For all categories of corporate membership,

Annual Subscription – HKD3,500

First Year Registration Fee – HKD650

I / WE enclose

- A cheque in the sum of HKD4,150 being the annual subscription and first registration, and
- Documentation as required under Section C.

I / We hereby apply to become a member of the International Professional Security Association (Hong Kong) Ltd.

I / We undertake to pay all future subscriptions in accordance with the Association's Rules.

I / We agree, if elected, to abide by the Ethical Code of Conduct and the Constitution and Rules of the Association.

I / We acknowledge that the company can only use the IPSA(HK) Ltd logo for commercial purposes, whilst the holder of a current licence issued by the Hong Kong Security and Guarding Services Industry Authority.

Signed \_\_\_\_\_ (Director/Partner/Proprietor) Full Name (in capitals) \_\_\_\_\_

Date \_\_\_\_\_ Position with company \_\_\_\_\_

Please return this form together with your cheque to The Secretary of IPSA(HK) Ltd,  
GPO Box 1852, Central, Hong Kong. Your cheque should be made payable to  
**"International Professional Security Association (Hong Kong) Ltd"**