



## Study Mission to Qingyuan and Guangzhou

( )



**Jointly organised by the Institute and the Hong Kong Trade and Development Council**

Date	<b>8 - 10 January 2006</b>
Participation fee	<b>\$1,800 per participant</b>
CPD credit hours	<b>6 hours</b>
Delegation size	<b>30 persons</b>
Registration deadline	<b>23 December 2005</b>

### Mission highlights

- visit the renowned enterprises in Qingyuan
- introduce the trade development and investment opportunities in Qingyuan
- attend the networking lunches/dinner to establish the business contact with the Government authorities in these two places
- keep abreast with the updated development in tax, customs, finance and foreign trade regulations in Qingyuan and Guangzhou
- meet the Guangdong Provincial Institute of CPAs or Guangzhou Institute of CPAs

*(Please turn overleaf to the information sheet for more details)*

### Enjoy the grant from SME Export Marketing Fund

Participants are eligible for application of the SME Export Marketing Fund provided by the Trade and Industry Department. A maximum of 50% of the participation fee may be granted. For details of the Fund and its application procedures, please refer to [http://www.smefund.tid.gov.hk/eng/eng\\_main.html](http://www.smefund.tid.gov.hk/eng/eng_main.html).

### Sign up now and seize another business opportunity

**To enrol** please complete the enclosed enrolment form and return it with payment to the Institute.

**Acceptance** is on a first-come-first-served basis. Confirmation on enrolment will be sent out before the event.

**Enquiries** Miss Yvonne Chew, tel: (852) 2287 7057 / email: [yvonnechew@hkicpa.org.hk](mailto:yvonnechew@hkicpa.org.hk)

# Study Mission to Qingyuan and Guangzhou Information Sheet

8 - 10 January 2006

## Itinerary (tentative)

2006 1 8 ( )  
( )

2006 1 9 ( )

09:00  
10:30  
12:00  
14:30  
16:00  
17:30  
18:00

2006 1 10 ( )

09:00  
11:00  
12:30  
15:00  
16:55 (T821),

## Participation fee

HK\$1,800 per participant for occupying a single room

The fee includes:

- Bus from Hong Kong to Qingyuan on 8 January 2006
- Meals\* during the Mission (except meals on 8 January 2006 and a dinner on 10 January 2006)
- One night accommodation in Qingyuan and Guangzhou respectively
- In-town bus transit in Qingyuan and Guangzhou
- A train ticket from Guangzhou to Hong Kong on 10 January 2006

The fee does **NOT** include:

- visa application costs (participants are responsible for their own visa application)
- insurance cost
- any personal expenses

\* The networking lunches and dinner will be organised by TDC subject to the acceptance of invitation by the Government officials in Qingyuan and Guangzhou. In case there is cancellation of the lunch/dinner, no reduction of participation fee or alternative arrangements.



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8 - 10 January 2006

### Enrolment Form

(Please reply on or before 23 December 2005)

#### FOR OFFICE USE

Seq. no.: \_\_\_\_\_  
 Handle by: \_\_\_\_\_

**Our practice would like to enroll to the captioned Mission. We understand that the participation fee paid is non-refundable under any circumstances or due to withdrawal for any personal reasons after acceptance of our enrolment by the Institute.**

(Please complete in block letters)

Practice name: \_\_\_\_\_ Practice no.: \_\_\_\_\_

Name of practice representative(s): 1. Mr./Ms./Mrs. \_\_\_\_\_

2. Mr./Ms./Mrs. \_\_\_\_\_

3. Mr./Ms./Mrs. \_\_\_\_\_

Contact person: Mr./Ms./Mrs. \_\_\_\_\_

Telephone no.: \_\_\_\_\_ Fax no.: \_\_\_\_\_

Email: \_\_\_\_\_

Payment for the Mission:	Amount (HK\$)	No. of person(s)	Total (HK\$)
- Participation fee	\$1,800	x _____	= _____

Payment by: <input type="checkbox"/> Cheque no.: _____ (Bank: _____) <input type="checkbox"/> Institute's VISA Gold Card <input type="checkbox"/> Institute's VISA Platinum Card			
For payment by credit card, please fill in the following:	Card no.: _____		
Cardholder's Name : (Please print)	Card Expiry Date (month/year) :		
Date :	Cardholder's Signature :		
Cheque should be made payable to "Hong Kong Institute of Certified Public Accountants" Only Institute's Affinity Credit Card is accepted.	<b>FOR OFFICE USE</b>		
	Auth. code no.	Handled by	Date
	_____	_____	_____

#### Notes:

1. An alternate to attend the Mission may be accepted in case the participant is unable to attend. Please inform the Institute on or before 30 December 2005 if such arrangement is required.
2. If the number of enrolment is **less than 10**, the Mission will be cancelled.

(Separate form for **EACH** representative)

**Personal particular of our practice representative (Please complete in CHINESE):**

: \_\_\_\_\_

: \_\_\_\_\_

: \_\_\_\_\_

: \_\_\_\_\_

:     /     / \_\_\_\_\_

(     ): \_\_\_\_\_

: \_\_\_\_\_

: (香港) \_\_\_\_\_

(國內) \_\_\_\_\_

**Details for the reservation of hotel accommodation:**

1. Chinese Visa/PRC re-entry permit (     ) no.: \_\_\_\_\_

Expiry date (dd-mm-yy): \_\_\_\_\_

2. HKID/ Passport no.: \_\_\_\_\_

3. Nationality: \_\_\_\_\_

4. Date of birth (dd-mm-yy): \_\_\_\_\_