Please read the following carefully before you retrieve, print or complete this form.
在索取、列印或填寫表格前，請閣下先詳閱下文。

Disclaimer

Any form downloaded/printed via any electronic media provided by Chow Tai Fook Life Insurance Company Limited ("CTF Life") (e.g. corporate website, interactive voice response system) is done at your own discretion and risk. CTF Life is not responsible for any printing error that results from the form download/printing and any loss or damage howsoever caused as a result of such printing error. In the event that there is any printing error in the downloaded/printed form, CTF Life may require you to fill in a correct form before starting to process your application.

For forms downloaded from the Internet (the "Internet Printed Form"), upon completing and signing the Internet Printed Form, you shall be deemed to have read and understood the contents of the form displayed on computer screen (the "Displayed Form") which shall prevail in case there is any inconsistency, contradiction or difference of whatever kind between the Displayed Form and the Internet Printed Form and have agreed to all provisions contained therein and to have agreed and undertaken not to raise any objection whatsoever in connection with any inconsistency, contradiction of difference of whatever kind between the Displayed Form and the Internet Printed Form.

CTF Life reserves the right to update the forms from time to time as it sees fit and also reserves the right to accept or reject the form submitted by you.

免責聲明

閣下凡透過周大福人壽保險有限公司 [周大福人壽] 之電子收發渠道 [如公司網站、互動語音回應系統] 下載或列印任何表格，應自行考慮及衡量需承擔之風險。周大福人壽概不負責任何因下載或列印表格所引致的列印錯誤及其可能導致之任何損失或毀壞。若閣下提交之下載或列印表格有任何列印錯誤，周大福人壽有可能在處理閣下的申請前要求閣下填寫一份正確之表格。

當閣下填寫及簽署由網站下載之表格 [互聯網列印表格] ，則被視作閣下已詳閱及明白電腦螢幕上出現之表格 [閱覽表格] 之內容，並同意表格內之所有條文。如該閱覽表格與互聯網列印表格出現任何不符、矛盾或分歧時，閣下同意並承諾不會提出任何異議。如閱覽表格與互聯網列印表格出現任何不符、矛盾或分歧時，概以閱覽表格為準。

周大福人壽有權隨時在認為適當情況下更新表格內容，並保留接受或拒絕閣下遞交之申請表格的權利。

萬用壽險計劃服務申請書
Universal Life Plan Service Request Form

CTF Life 周大福人壽

保單號碼 Policy Number (the Policy)		保險代理人/ 保險經紀姓名 Name of the Insurance Agent / Insurance Broker	
保單持有人姓名 Name of Policy Owner		保險代理人/ 保險經紀編號 Insurance Agent / Insurance Broker Code	
受保人姓名 Name of Insured		保險代理人/保險經紀電話號碼 Insurance Agent / Insurance Broker Telephone No.	

請在適當的方格加上「剔」號(✓) Please "Tick" (✓) as appropriate.

本人/我們現要求周大福人壽保險有限公司(「周大福人壽」)接納以下的申請。本人/我們明白周大福人壽根據以上保單的保單條款有權拒絕該項申請。
I/We hereby request Chow Tai Fook Life Insurance Company Limited ("CTF Life") to accept the following request. I/We understand that CTF Life has rights to decline acceptance of such request in accordance with the policy provisions of the above policy.

☐ 第一部份 提取賬戶價值
Part 1 Withdrawal of Account Value

重要提示 Important Notes

1. 周大福人壽有權就每一次賬戶價值之提取徵收退保費用。詳情請參閱保單資料說明及保單條款。周大福人壽將會從被要求提取的賬戶價值中扣除退保費用後才向 閣下付款。
   CTF Life has the right to impose a surrender charge for each withdrawal of account value. Please refer to Policy Specifications and Policy Provisions for details. CTF Life will deduct the surrender charge from the account value requested to be withdrawn before making payment to you.
2. 每次提取金額及提取後之最低賬戶餘額要求須符合本申請書的末頁之最低金額要求。
   The amount of each withdrawal and the minimum account balance immediately after withdrawal are object to the requirements as listed in the last page of this form.
3. 於首個保單年度內（只適用於「盛悅」萬用壽險保障計劃）/ 於首兩個保單年度內（只適用於「盛利保」萬用壽險保障計劃），閣下只可從額外賬戶提取金額。提取次序為先從額外賬戶（如有）以先入先出原則提取，然後從基本賬戶以先入先出原則提取。
   If the first policy year (applicable to "Gorgeous" Universal Life Protection Plan) / In the first two policy years (applicable to "Wealth Achiever" Universal Life Protection Plan), account value can only be withdrawn from the Top-up Account. The withdrawal sequence is first-in-first-out from the Top-up Account (if any) and then first-in-first-out from the Basic Account.

提取賬戶價值金額 Amount of Account Value to be withdrawn: 美元 US$ _____

☐ 第二部份 保單貸款
Part 2 Policy Loan

重要提示 Important Notes

1. 適用於「盛利保」萬用壽險保障計劃及「盛悅」萬用壽險保障計劃。
   Applicable to "Wealth Achiever" Universal Life Protection Plan and "Gorgeous" Universal Life Protection Plan.
2. 閣下只可於第一個保單週年日後，在保單存有淨賬戶價值期間申請保單貸款。
   You may apply for Policy loan only after the first Policy anniversary when the Policy has a Net Account Value.
3. 周大福人壽對其將保單貸款須收取利息，息率由周大福人壽釐定。現時年利率為8%。周大福人壽有權不時調整息率。當周大福人壽批准此保單貸款申請時，我們會書面通知你所收取的息率。在任何保單週年日未繳付的利息將被納入貸款本金並按相同息率計算所須收取的利息。
   Policy loan will bear interest at a rate determined by CTF Life (currently is 8% per year) CTF Life has the right to change the interest rate from time to time. CTF Life shall notify you in writing of interest being charged at the time it approve(s) this policy loan application. Unpaid interest at any Policy Anniversary will be added to the principal of such loan and will bear interest at the same rate.
4. 您可以隨時償還全部或部份保單貸款及應付而未付的利息。周大福人壽將從保單的任何給付金額（如保單退保價值或身故收益）中先行扣除。任何未償還的保單貸款及其貸款利息。
   Policy loan and outstanding interest may be repaid in full or in part at any time. Any unpaid policy loan and its unpaid loan interest will be deducted from any amount payable under the Policy (such as policy surrender value, or death proceeds)
5. 倘若淨賬戶價值相等於或少於零，上述保單將根據保單條款被終止。
   If the net account value falls to zero or below, the above policy will be terminated in accordance with the policy provisions.
6. 任何與保單貸款有關之通知寄往保單持有人及受讓人在周大福人壽的記錄最後為人所知的郵政地址，將被視為妥為送達。
   Any notice in connection with the policy loan addressed and mailed to the last known postal address of the Policy Owner and of any assignee in the record of CTF Life, shall be deemed to have been duly given.

借貸金額為美元 Amount of Loan is US$ _____

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☐ 第三部份 額外保費
Part 3 Top-up Premium

重要提示 Important Notes

1. 適用於「盛利保」萬用壽險保障計劃及「盛悅」萬用壽險保障計劃。
   Applicable to "Wealth Achiever" Universal Life Protection Plan and "Gorgeous" Universal Life Protection Plan.
2. 請同時填妥並遞交「申請人資料分析表格」。
   Please also complete and submit the "Applicant Information Analysis" form.
3. 額外保費須受載於本申請書的末頁的限制約束。
   Top-up Premium is subject to the restrictions as listed on the last page of the form.

合共額外保費: 美元$_____,包括:

Total Top-up Premium: US$_____, consisting of:

(i) 連同此表格所繳交之額外保費: 美元 _____
Top-up Premium paid with this form: US$ _____

☐ 支票 / 本票 / 直接存款 / 轉賬至本公司戶口 Chqeue / Bank Draft / Direct Deposit or Transfer to the company bank account

☐ 電匯 / 電子繳費Telegraphic Transfer / Electronic Payment

付款 / 轉賬日期Date of Payment/Transfer: _____

☐ 其他 (請註明) Others (Please specify): _____

(ii) 非連同此表格所繳交之額外保費: 美元 _____
Top-up Premium not paid with this form: US$ _____

付款指示 Payment Instruction

直接轉帳 By Faster Payment
只適用於香港銀行戶口及以港幣支付不多於港幣100萬之款項
Only applicable to bank account in Hong Kong and payment in Hong Kong dollar up to HKD1,000,000

❒ **存入銀行戶口 Credit to the bank account**
(如閣下未曾登記銀行戶口, 請完成直接轉帳申請表格或掃描二維碼透過手機應用程式遞交申請)
(Please complete the Faster Payment Form or scan the QR code and send the application via mobile app unless you have provided Faster Payment Information before)

電匯 By Telegraphic Transfer
只適用於海外客戶
Only applicable for overseas client

❒ **以電匯形式發放至收款銀行戶口 Wire the payment by Telegraphic Transfer to the bank account**
(如閣下未曾登記收款銀行戶口, 請完成付款指示授權書表格或掃描二維碼透過手機應用程式遞交申請)
(Please complete the Authorization for Payment Instruction Form or scan the QR code and send the application via mobile app unless you have provided Authorization for Payment Instruction before)

*** 註：以電匯方式將款項支付將涉及銀行手續費。**
Please note : To receive payment by the means of Telegraphic Transfer, the bank charges will be incurred.

支票 By Cheque

支票類別 Cheque type
❒ 美元支票 (本港兑現) (註：只適用於美元保單)
USD Cheque (HK Clearance) (Note: Only applicable to USD policy)
❒ 港元支票 (本港兑現)
HKD Cheque (HK Clearance)
❒ 美元本票 (海外兑現) (註：只適用於美元保單)
USD Bank Draft (foreign clearance). (Note: Only applicable to USD policy)

領取方式 Delivery Method
❒ 郵寄通訊地址 By mail to correspondence address
❒ 於客戶服務中心領取 To be collected at Customer Service Centre
地點 Location : ❒ 觀塘客戶服務中心 Customer Services Centre - Kwun Tong
❒ 尖沙咀客戶服務中心 Customer Services Centre - Tsim Sha Tsui

客戶聯絡電話號碼 Client Contact No.: _____
❒ 經理財顧問轉交 Through my Financial Consultant

注意: 如沒註明，支票將直接寄給您。Note: If not specify, the cheque will be delivered to you directly.

款項轉到保單 Transfer to Policy

❒ 請將款項轉到由本人持有的保單作為下列用途：
Please transfer the amount to policy which is also owned by me for the purpose listed below:

保單號碼 Policy No.	金額 Amount	用途 Purpose
	$	❒ 新生意保費 New Business Premium ❒ 保單更改按金 Deposit for Change ❒ 續期保費 Renewal Premium ❒ 償還保單貸款 Loan Repayment

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個人資料收集聲明 Personal Information Collection Statement

本人 / 我們確認本人 / 我們已閱讀及明白周大福人壽保險有限公司（以下簡稱 “周大福人壽”）之個人資料收集聲明 (“該聲明”)。本人 / 我們聲明及同意貴公司可根據該聲明所述的任何目的收集及 / 或持有、使用及/或披露/分享任何個人資料（不論是否從此表格或以其他方式獲得） 。本人 / 我們明白本人 / 我們必須於此表格提供所須資料，否則貴公司將可能無法執行該聲明之目的及 / 或向本人 / 我們提供產品或服務。本人 / 我們確認及同意本人 / 我們的個人資料可能披露/共享給該聲明所指明的第三方; 執法機構; 保險業就現有資料而對所提供的資料作出分析和檢查而使用的數據庫或登記冊作出於該聲明所述的任何目的。本人/我們明白該聲明的最新版本可於周大福人壽的網址下載：www.ctflife.com.hk，及可向貴公司索取。

I /We confirm that I/we have read and understood Chow Tai Fook Life Insurance Company Limited (ñCTF Lifeò)ôs Personal Information Collection Statement (ñPICSò). I/We declare and agree that any personal data CTF Life may collect and/or hold, use and/or disclose/share with (whether contained in this form or otherwise obtained) in accordance with the Purposes as set out in the PICS. I/We understand that if I/we do not provide the required personal data, CTF Life may not be able to perform the Purposes and/or provide products or services to me/us. I/We acknowledge and agree that my/our personal data may be disclosed/shared with specified parties in the PICS; law enforcement authorities; databases or registers used by the insurance industry to analyse and check information provided against existing information for any of the Purposes stated in the PICS. I/We understand the updated version of the PICS is available for download from CTF Lifeôs website: www.ctflife.com.hk, and will be made available upon request.

聲明及授權 Declaration and Authorization

本人/我們明白上述申請事項得到周大福人壽批准後，將於批核日或將特別註明的較後日期生效。
I/We understand that my/our request shall take effect on the date of approval of this application or a later date to be specified.

以下僅適用於以電匯或本票為款項發送方式時 (Below only applicable when select Telegraphic Transfer or Bank Draft as the payment method)

本人謹此要求周大福人壽保險有限公司(「周大福人壽」)以電匯或本票方式將款項支付予本人，本人知悉透過該等方式領取款項涉及手續費。本人簽署本表格後，表示本人同意支付因電匯或本票領取款項引起的有關手續費，並同意承擔因本人提供資料錯誤而引致本人或周大福人壽之金錢上的損失以確保周大福人壽不受任何損失。

I hereby request to receive the payment by the means of Telegraphic Transfer or Bank Draft and understand that bank charges incur as a result of this arrangement. By signing this form, I hereby agreed to bear the bank charge arising from the payment method stated below and I will be solely responsible for any financial lossincurred by me or CTF Life as result of any incorrect information as provided by me to hold CTF Life harmless.

本人/我們明白若此表格的中、英文兩個版本有任何抵觸或不相符之處，應以英文版本為準。
I/We understand that if there is any inconsistency or ambiguity between the English version and the Chinese version of this form, the English version shall prevail.

X	X	X	X
保單持有人及受讓人簽署 (如有) Signature of the Policy Owner and Assignee (if any)	簽署日期 (日/月/年) Date of Signature (DD/MM/YY)	見證人 / 保險代理人 / 保險經紀簽署 Signature of Witness / Insurance Agent / Insurance Broker	簽署日期 (日/月/年) Date of Signature (DD/MM/YY)

見證人 / 保險代理人 / 保險經紀姓名
Name of the Witness / Insurance Agent / Insurance Broker (　　)

* *簽署式樣須與投保書或本公司的最後之紀錄相同*
* *Signature must be consistent with that on the application form or company's latest record*

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萬用壽險計劃之限制摘要 Summary of the restrictions of Universal Life Plan

提取賬戶價值 Withdrawal of Account Value

計劃名稱 Name of Plan	最低每次提取金額 Minimum amount of each withdrawal	每次提取後最低賬戶結餘及要求 Minimum account balance and requirements after withdrawal
「盛利保」萬用壽險尊尚計劃 "Wealth Achiever" Universal Life Plan	美元 US$1,000	美元 US$30,000
「盛利保」萬用壽險保障計劃 "Wealth Achiever" Universal Life Protection Plan	美元 US$1,000	• 提取後的保單價值需最少足夠繳付未來3個月的保單費用 The minimum account balance after withdrawal can cover the monthly deductions for 3 months • 基本賬戶只可在第2個保單週年後申請提取款項，保額可能會因應提取的金額調低，而調減後之保額不可少於美元250,000。 Withdrawal from the Basic Account is only applicable after the 2nd policy anniversary, the withdrawn amount will trigger a decrease of sum insured, the decreased after the 2nd policy anniversary sum insured cannot be less than US$250,000.
「盛悅」萬用壽險保障計劃 "Gorgeous" Universal Life Protection Plan	美元 US$1,000	• 提取後的保單價值需最少足夠繳付未來3個月的保單費用 The minimum account balance after withdrawal can cover the monthly deductions for 3 months • 基本賬戶只可在第1個保單週年後申請提取款項，保額可能會因應提取的金額調低，而調減後之保額不可少於美元250,000。 Withdrawal from the Basic Account is only applicable after the 1st policy anniversary, the withdrawn amount will trigger a decrease of sum insured, the decreased after the 2nd policy anniversary sum insured cannot be less than US$250,000.

額外保費 Top-up Premium (額外保費必須於受保人100歲前繳付 Top-up Premiums are only allowed before the insured reaches 100 years of age)

計劃名稱 Name of Plan	最低額外保費金額 Minimum Top-up Premium Amount	最高額外保費金額 Maximum Top-up Premium Amount
「盛利保」萬用壽險保障計劃 "Wealth Achiever" Universal Life Protection Plan	美元 US$10,000	繳交額外賬戶保費後的總賬戶價值 (額外賬戶價值+基本賬戶價值)不得高於「目標值」* 的120% The Total Account Value after payment of Top-up Account premium (Top-up Account value + Basic Account Value) cannot be higher than 120% of the "Target Value" *「目標值」= 保額 X (1 / 102%) (100 – 已屆年齡) + 附加保費(如有) * "Target Value" = Sum insured x (1/102%) (100 - attained age) + additional premium (if any)
「盛悅」萬用壽險保障計劃 "Gorgeous" Universal Life Protection Plan	美元 US$10,000	• 整付保費計劃但計劃保費仍未清繳：不可申請額外保費 Single Premium Plan but the premium not fully paid: Application of Top-up Premium not allowed • 整付保費計劃並已清繳計劃保費： 最高額外賬戶保費=(當時保額的85% - 總賬戶價值) ÷ (1–額外賬戶保費費用率) Single Premium Plan with premium fully paid: Max. Top-up Premium = (Current Sum Insured x 85% - Total Account Value) ÷ (1–Top-up Premium Charge Rate) • 限期繳付計劃並於保費繳付年期內： 最高額外賬戶保費=(當時保額的50% - 總賬戶價值) ÷ (1–額外賬戶保費費用率) Regular Premium Plan within the Premium Paying Period: Max. Top-up Premium = (Current Sum Insured x 50% - Total Account Value) ÷ (1–Top-up Premium Charge Rate) • 限期繳付計劃並於保費繳付年期完結後： 最高額外賬戶保費=(當時保額的85% - 總賬戶價值) ÷ (1–額外賬戶保費費用率) Regular Premium Plan after the Premium Paying Period: Max. Top-up Premium = (Current Sum Insured x 85% - Total Account Value) ÷ (1–Top-up Premium Charge Rate)

保單貸款 Policy Loan

計劃名稱 Name of Plan	最低貸款額 Minimum loan amount	最高貸款額 Maximum Loan Amount
「盛利保」萬用壽險保障計劃 "Wealth Achiever" Universal Life Protection Plan	美元 US$1,000	(賬戶價值 - 退保費用) x80% - 任何欠款 (Account value – surrender charge) X 80% - Any indebtedness
「盛悅」萬用壽險保障計劃 "Gorgeous" Universal Life Protection Plan	美元 US$1,000	(賬戶價值 - 退保費用) x80% - 任何欠款 (Account value – surrender charge) X 80% - Any indebtedness

申請編號 / 保單號碼
Application Number / Policy Number

CTF Life
周大福人壽

中華人民共和國附錄（“本附錄”）
The People's Republic of China Addendum (this "Addendum")

本聲明可能會不時更新，以反映我們因應個人資料保護和/或個人資料/數據私隱法律和法規變化而產生的政策變更。如有重大變更，我們將通知您並徵得您對變更、同意和/或選擇（必要或適用時）的許可。如果您不接受變更和/或提供您的許可，那麼我們可能無法執行目的和/或向您提供商品與服務。我們建議您定期查看應用程式和/或網站（視情況而定）以獲取本聲明的更新版本。
This Statement may be updated from time to time to reflect changes to our policy with respect to personal data protection and/or changes to personal data/data privacy laws and regulations. Where there are significant changes, we will notify you and obtain your acceptance of the changes, consents, and/or opt in (as necessary or applicable). If you do not accept the changes and/or provide your consent, then we may not be able to perform the Purposes and/or provide goods or services to you. You are advised to check the Application and/or the Website (as the case may be) for updates to this Statement on a regular basis.

本聲明中的任何內容均不限制您根據《私隱條例》所享有的權利。
Nothing in this Statement shall limit your rights under the PDPO.

如果您是：
If you are:

(i) 位於中國內地的個人，於中國內地訪問周大福人壽相關網站或使用周大福人壽相關流動應用程式或從中國內地通過手機或任何其他方式使用周大福人壽產品及/或服務；及/或
an individual located in Mainland China who visits CTF Life's relevant website(s) or uses relevant mobile application(s) of CTF Life, or otherwise uses CTF Life's products and/or services by phone or any other means from Mainland China; and/or

(ii) 持有中國內地護照及/或居民身份證的個人，到訪周大福人壽在香港的客服中心或其他實體場所或在香港通過手機或任何其他方式使用周大福人壽產品及/或服務，
an individual holding a Mainland China passport and/or resident identity card who visits the service centres or other physical premises of CTF Life in Hong Kong or otherwise uses CTF Life's products and/or services by phone or any other means in Hong Kong,

除(i)周大福人壽私隱政策和(ii)本聲明以及中國內地適用的數據保護法律和法規外，周大福人壽將根據“中華人民共和國附錄”處理您的個人資料。就此處目的而言，中國內地是指除香港、中華人民共和國澳門特別行政區和台灣以外的地區。
your personal data will be processed by CTF Life in accordance with the "People's Republic of China Addendum" in addition to the (i) CTF Life Privacy Policy Statement and (ii) this Statement, as well as the applicable data protection laws and regulations in Mainland China which, for the current purposes, excludes Hong Kong, the Macau Special Administrative Region of the People's Republic of China and Taiwan.

中華人民共和國附錄：https://www.ctflife.com.hk/tc/disclaimer/prcaddendum
The People's Republic of China Addendum: https://www.ctflife.com.hk/en/disclaimer/prcaddendum

中華人民共和國附錄之附件1：https://www.ctflife.com.hk/tc/disclaimer/prcaddendum/appendix1
Index 1 to the People's Republic of China Addendum: https://www.ctflife.com.hk/en/disclaimer/prcaddendum/appendix1

中華人民共和國附錄之附件2：https://www.ctflife.com.hk/tc/disclaimer/prcaddendum/appendix2
Index 2 to the People's Republic of China Addendum: https://www.ctflife.com.hk/en/disclaimer/prcaddendum/appendix2

中華人民共和國附錄之附件3：https://www.ctflife.com.hk/tc/disclaimer/prcaddendum/appendix3
Index 3 to the People's Republic of China Addendum: https://www.ctflife.com.hk/en/disclaimer/prcaddendum/appendix3

中華人民共和國附錄之附件A-關於處理未成年人個人資料的規則：https://www.ctflife.com.hk/tc/disclaimer/prcaddendum/annexA
Annex A to the People's Republic of China Addendum – Rules on processing minors' personal data: https://www.ctflife.com.hk/en/disclaimer/prcaddendum/annexA

我，作為保單持有人及/或受保人（如適用）及/或未成年人的父母或法定監護人（如適用）已閱讀理解並同意周大福人壽的中華人民共和國附錄（“附錄”）及附錄之附件A（“附件A”）（如適用）全部內容。
I, as the Policy Owner and/or the Insured (if applicable) and/or the parent or legal guardian of the Minor (if applicable), have read, understood and agreed to all content contained in the CTF Life's People's Republic of China Addendum ("Addendum") and Annex A to the Addendum ("Annex A") (where applicable).

保單持有人 Policy Owner	受保人 Insured	未成年人的父母或法定監護人 Parent or legal guardian of the Minor	
☐	☐	☐	本人同意根據“附錄” 及 “附件A” （如適用） 目的對本人及/或未成年人的個人信息（包括敏感個人信息）的收集、使用及處理。 I consent to the collection, use and processing of my and/or the Minor's personal data (including sensitive personal data) in connection with the Purposes set out in the "Addendum" and "Annex A" (if applicable).
☐	☐	☐	本人同意將本人及/或未成年人的個人信息（包括敏感個人信息）轉移至中國內地以外地區。 I consent to the transfer of my and/or the Minor's personal data (including sensitive personal data) to outside Mainland China.
☐	☐	☐	本人同意向第三方提供本人及/或未成年人的個人信息（包括敏感個人信息）。 I consent to providing my and/or the Minor's personal data (including sensitive personal data) to third parties.

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我，作為保單持有人及/或受保人（如適用）及/或未成年人的父母或法定監護人（如適用），**確認上述本人勾選 “同意”**(i) 有關根據“附錄”及 “附件A”目的對本人作為保單持有人及/或受保人（如適用）及/或未成年人（如適用）的個人信息(包括敏感個人信息)的收集、使用及處理及/或 (ii) 轉移本人作為保單持有人及/或受保人（如適用）及/或未成年人（如適用）的個人信息(包括敏感個人信息)至中國內地以外地區及/或(iii)向第三方提供本人作為保單持有人及/或受保人（如適用）及/或未成年人（如適用）的個人信息(包括敏感個人信息)，**此等 “同意”將適用於本人作為保單持有人及/或受保人（如適用）及/或未成年人（如適用）在周大福人壽作為保單持有人及/或受保人的所有現行生效及/或等候復效的保單（如適用）**。

I, as the Policy Owner and/or the Insured (if applicable) and/or the parent or legal guardian of the Minor (if applicable), **confirm my respective consent given above in relation to** (i) the collection, use and processing of personal data (including sensitive personal data) of myself as the Policy Owner and/or the Insured (if applicable) and/or the Minor (if applicable) in connection with the Purposes set out in the “Addendum” and “Annex A” and/or (ii) the transfer of personal data (including sensitive personal data) of myself as the Policy Owner and/or the Insured (if applicable) and/or the Minor (if applicable) to outside Mainland China and/or (iii) providing personal data (including sensitive personal data) of myself as the Policy Owner and/or the Insured (if applicable) and/or the Minor (if applicable) to third parties, **shall be applicable to all existing policies which are in-force and/or waiting for reinstatement of myself as the Policy Owner and/or the Insured (if applicable) and/or the Minor (if applicable) as the Policy Owner and/or the Insured at CTF Life (if applicable)**.

本聲明受香港法律約束並據其進行解釋。
This Statement shall be governed by, and construed in accordance with, the laws of Hong Kong.

我已閱讀並理解以上周大福人壽的《個人資料收集聲明》。
I have read and understood the above Personal Information Collection Statement of CTF Life.

☐ 我同意接收來自周大福人壽的直接促銷，詳情已載於上文所述的《個人資料收集聲明》。
I consent to receive direct marketing from CTF Life, details of which have been set out in the Personal Information Collection Statement mentioned above.

☐ 我同意接收來自周大福人壽的關聯公司和/或周大福人壽的營銷合作夥伴的直接促銷，詳情已載於上文所述的《個人資料收集聲明》。
I consent to receive direct marketing from CTF Life’s Affiliates and/or from CTF Life’s Marketing Partners, details of which have been set out in the Personal Information Collection Statement mentioned above.

申請人/保單持有人姓名 (如非準受保人/受保人) Name of the Applicant / Policy Owner (if other than the Proposed Insured / Insured)	X 申請人/保單持有人簽署 (如非準受保人/受保人) Signature of the Applicant / Policy Owner (if other than the Proposed Insured / Insured)	簽署日期 (日 / 月 / 年) Signed on (DD / MM / YY)
準受保人/受保人姓名 (適用於18歲或以上) Name of the Proposed Insured / Insured (Applicable to age 18 or above)	X 準受保人/受保人簽署 (適用於18歲或以上) Signature of the Proposed Insured / Insured (Applicable to age 18 or above)	簽署日期 (日 / 月 / 年) Signed on (DD / MM / YY)
準受保人/受保人父母姓名或法定監護人 (如準受保人/受保人18歲以下) Name of Proposed Insured / Insured’s parent or legal guardian (if proposed insured / Insured aged 18 below)	X 準受保人/受保人父母或法定監護人簽署 (如準受保人/受保人18歲以下) Signature of Proposed Insured / Insured’s parent or legal guardian (if proposed insured / Insured aged 18 below)	簽署日期 (日 / 月 / 年) Signed on (DD / MM / YY)

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