

Dear Colleagues,

4 December, 2022

2023 MEMBERSHIP RENEWAL

BENEFITS OF MEMBERSHIP

ITP Membership helps you get the recognition with the Professional Designation, gives you opportunities to join our regular Events and Activities at member's rate, such as the CPD visits, seminars, training programs, networking gatherings, mentoring programs, free advertising in our website for consultant members, and our e-Newsletter ITP LINK. We also would like you to invite your friends and colleagues in the HR and Development fields to join our membership.

MEMBERSHIP FEE

In view of the pandemic of COVID-19 that brought about the negative impacts on the economic environment in Hong Kong, ITP would like to announce that:

- For <u>existing members</u>, their membership fees for 2023 will be fully waived. You can email us the Renewal / Updating slip if there are any updates of your personal particulars.
- For <u>new applicant</u>, the 2023 fee will be halved. Please enclose a cheque for the appropriate fee, payable to "**Institute of Training Professionals**" or you may bank-in to our Account No.: 132-40-05224-0 at the **Bank of East Asia** and email the Bank-in Slip by following the application procedures.

HALF-ANNUAL FEE SCHEDULE as below: * Professional Designation

Fellow	* FITP	\$300- \$150	Affiliate	\$100- \$50
Member	* MITP	\$200- \$100	Retired / Student Member	Free
Associate	*AMITP	\$150 <mark>\$75</mark>		

Note: Associate Members with 5 full years of membership are eligible for upgrading to **Full Member** status by paying the specified annual fee of a Member.

At this festive season, we wish you *A Promising and Productive Year of Rabbit in 2023!* Sincerely,

Dr. Eleanor CHEUNG Chairman

INSTITUTE OF TRAINING PROFESSIONALS 培 訓 專 業 學會

c/o Room 2212, Fortune Commercial Building, 362 Sha Tsui Road, Tuen Wan, Hong Kong

Tel: 2811 9923 Website: www.itp.org.hk Email: info@itp.org.hk

Facebook: www.facebook.com/ITPHK

Linkedin: www.linkedin.com/in/instituteoftrainingprofessionals/

RENEWAL / UPDATING SLIP

PERSONAL PARTICULARS

Fields with an asterisk (*) must be filled.	* Date:
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* Membership Grade	□ FITP □ MITP □ AMIT	P Affiliate	Retired / Student Member
* Name (Dr/Mr./Ms)		* Membership No.	
Company		Position	
Contact Address			
Telephone		Mobile Phone	
Email Address		* Signature	
Remarks, if any			

CORRESPONDENCE ADDRESS:

INSTITUTE OF TRAINING PROFESSIONALS

c/o Room 2212, Fortune Commercial Building,

362 Sha Tsui Road, Tusen Wan,

Hong Kong

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