

The Society of the Golden Keys of Hong Kong (AFFILIATED TO THE U.I.C.H. LES CLEFS D'OR)



"SERVICE THROUGH FRIENDSHIP"

MEMBERSHIP APPLICATION FORM

Les Clefs d'Or Member

Any Chief Concierge (who having 2 years of experience of being a Chief Concierge of a hotel in Hong Kong) or Assistant Chief Concierge (having 3 years of experience of being an Assistant Chief Concierge of hotel in Hong Kong) who also acquired a minimum of 5 years working experience in the Concierge Department of a hotel may apply for election as Les Clefs d'Or member of the Society.

Local Member

Any Chief Concierge (who having 2 years of experience of being a Chief Concierge of a hotel in Hong Kong) or Assistant Chief Concierge (having 3 years of experience of being an Assistant Chief Concierge of a hotel in Hong Kong) but less than 5 years working experience in the Concierge Department of a hotel may apply for election as local member of Society.

Any Assistant Concierge (who having 2 years of experience of being an Assistant Concierge of a hotel in Hong Kong) who also acquired a minimum 5 years working experience in the Concierge Department of a hotel may apply for election as local member of Society.

Note: Position of Assistant Concierge is not eligible to apply for Les Clefs d'Or membership

| I wish to become a | Les Clefs d'Or Member | Local Member |
|---|--|-----------------------------------|
| of The Society of The Golden K reached the minimum require | eys of Hong Kong ("The Society" ment for membership. | "). I declare that I have |
| I understand that by withholdi disqualify me from being a me | · · | statement in this application wil |
| I understand that there will be HK\$3,600.00. | an entrance fee of HK\$1,000.00 |) and yearly subscription of |
| I also understand the members | ship interview fee of HKD1000 v | will be applied and can be offset |

against the initial fee for successful applicants. This policy will take effect on 1st January 2025.

I further understanding that by joining The Society, I consent to the publication of my image in all kinds of media for the promotion of the goodwill of The Society.



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MEMBERSHIP FORM

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|------------------------------------|------------------------------|-----------------------------------|---------------------|-----------------|
| Last Name ** | | First name ** | | |
| Date of Birth (DD/MM/YYYY) | | Birthplace | | |
| Nationality | | Gender | | |
| Address | | | | |
| Address | | | | |
| Zip | | City | | |
| Telephone | | Personal email ** | | |
| | | 1 | | |
| Hotel Name** | | | | |
| Hotel group ** | | | | |
| Address ** | | | | |
| | | | | |
| Zip ** | | City ** | | |
| Telephone ** | | Fax ** | | |
| Direct line ** | | Personal work / business email ** | | |
| Website ** | | Professional email ** | | |
| Position ** | | Since ** | | |
| Type of employment (Permanent / C | Contract – please specify du | ration) | | |
| | | | | |
| Have you already been a M | Nember of « Les Clefs c | I'Or » ? ** | □ Yes □ N | 10 |
| Member section: ** | | | | |
| Notes: | | | | |
| | | | | |
| First propo | ocor. | T | Cocond pro- | nosor. |
| First proposer Name ** | | Second proposer Name ** | | |
| | | | | |
| Hotel – City, member section & mem | nbership number | Hotel – City, me | ember section & men | nbership number |
| Position | Signature | Position | | Signature |



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"SERVICE THROUGH FRIENDSHIP"

| | Conc | ierge Experience ** (Minim | num 5 years of activit | ty in a hotel lobby |) |
|--------------|-----------------|---------------------------------|---|---------------------------------------|---------------------|
| From | То | Hotel | City | Country | Position |
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| | | n the The Society of The Gol | | | |
| | | erges d'Hôtels "Les Clefs d'C | | ne statutes, ruie | s of procedure |
| ana pertorm | i my auties in | accordance with the U.I.C. | H. Charter. | | |
| 1 unders | tand that it is | my responsibility to update | The Society of The | e Golden Kevs o | f Hona |
| | | in the information given in t | | | |
| | | | | | |
| | | e insignia of the association | | | |
| | | ceptance of my application | | | |
| | | dels and trademarks, proper | | | |
| | • | as part of my Hotel Concier | ge activity and on | ly as long as I ar | m a member of th |
| associ | | ny longer once I no longer re | amain a member a | of the association | n The Society of |
| | | of Hong Kong, whatever the | | or the associatio | IT THE SOCIETY OF |
| | | e to third parties, even for a | | . without the ac | reement of |
| | oard of Direc | | , | , | , |
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| | | o longer remain a member | | | |
| | | equently of U.I.C.H. "Les Clef | | | |
| | will not use it | ne names and logos of the o | association on any | rype of corresp | oriderice or |
| oublication. | | | | | |
| ■ Lauthoriz | ze The Societ | ry of the Golden Keys of Hor | ng Kong to create | a record about | me in the UICH |
| | | ommunicate any of the abo | | | |
| | | noment and upon simple re | | | |
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Applicant's Signature

The Society of the Golden Keys of Hong Kong (AFFILIATED TO THE U.L.C.H. LES CLEFS D'OR) "SERVICE THROUGH FRIENDSHIP"





| Required attachments: Applicant's covering letter. Applicant's full resume with job descriptions. Applicant's ID photo (paper and digital). Applicant's photo in full uniform at your Concierge Desk (paper and digital). Letter of recommendation from your hotel General Manager with all necessary work certificates covering five years of activity in a hotel lobby, two years in the position of Chief Concierge or three years in the position of Assistant Chief Concierge or two years in the position of Assistant Concierge, with mention of your job title and seniority. Letter of recommendation from each of your proposer, member of UICH « Les Clefs d'Or ». A copy of Membership Application Form signed by the applicant and his/her two proposers. |
|---|
| A current check or copy of payslip (hiding the financial information) to The Society of The Golden Keys of Hong Kong to issue an initial membership fee and yearly subscription is needed for successful applicant. |
| Any section may add additional criteria, fix longer service time or require more documents, etc. |
| U.I.C.H. « Les Clefs d'Or », as an association registered in France. As such, it complies with the CNIL requirements (Commission Nationale Informatique & Libertés) which protects personal data, supports innovation and preserves individual liberties. It also complies with European GDPR/RGDP. All collected data will be used for the sole administrative purposes of UICH. Each Member can decide to display some of the information or not, and to make it available to membership only or to affiliates. All information required in this document is necessary to your application. Consent: Please check boxes. By completing this registration form, I agree that UICH "Les Clefs d'Or" may collect, process, |
| By completing this registration form, I agree that UICH "Les Clets a Or" may collect, process, store and / or use the personal data submitted in compliance with the rules set out below. By giving you my consent, I understand that I also retain the right to withdraw my consent, and the right to have my personal data deleted. I understand and agree that collecting my personal data is to check that my membership is in accordance with the statutes of our association; I understand and agree that collecting my personal data is to allow me to be in touch with all the members of our association; I understand and agree that the collection of my personal date will be utilized to inform me of the status and progression of our association. |
| |
| Name |

Date



The Society of the Golden Keys of Hong Kong (AFFILIATED TO THE U.L.C.H. LES CLEFS D'OR) "SERVICE THROUGH FRIENDSHIP"



For Office Use:

| Date: | | □ Accepted | □ Refused | |
|---|------------|------------------------------|----------------------|--|
| Reasons for refusal: | | | | |
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| | | | | |
| Signatures of examining members | <u> </u> | | | |
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| Note: The Applicant will be notified | d of his/h | or application result within | 2 | |
| 14 days after the General Meeting | g is held. | The Society will not give r | eason for refusal of | |
| any application. Interested person 6 months from the date of the refu | | | sh application after | |
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| | | | | |
| Retired on: | Position | : | | |
| | Hotel: | | | |
| Transferred on: | Section: | | | |
| | | | | |
| Deceased on: | [| ☐ Active | Retired | |
| Resigned on: | Reason: | | | |
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| Expelled on: | Reason: | | | |
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| Requested to have personal data deleted Date: | | | | |
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