

# FORM 1A

## Imagine Your Play Spaces – Design Competition for Public Play Spaces

### Standard Form for Declaration for Conflict of Interest (to be completed by declaring Participant / Team Leader / member of a Team Participant)

#### NOTE:

- Pursuant to clause 5.3(2) of the Competition Document, each Participant and Team Participant shall notify the Competition Advisor immediately should he or she become aware of the conflict of interest referred to above after submission of the Entry Form.
- This form is to be completed by the Participant or the member of a Team Participant who becomes aware of the conflict of interest referred to above after submission of the Entry Form.
- It is obligatory to provide personal data required by this Form unless otherwise specified.
- Full name shall be identical to your HKID Card No. or Passport No.. Complete the name in BLOCK LETTERS.
- \* Delete as inappropriate

#### SECTION 1: Declaring Participant's Particulars

##### 1. Personal Particulars

Surname : \_\_\_\_\_ (Mr./Miss/Ms.)  
Given Name : \_\_\_\_\_  
HKID Card/Passport No. (first 4 digits)\* : \_\_\_\_\_  
Telephone No. : \_\_\_\_\_  
Email Address : \_\_\_\_\_

##### 2. Entry Particulars

Participation Format *(Please tick one box)*:

Individual Participant     Team Participant  
\* Team Leader / Team Member (No. \_\_\_\_\_)

Confidential Registration Number

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## SECTION 2 : Declaration and Undertaking

1. In accordance with clause 5.3 of the Competition Document:
- (a) I declare that there is actual, potential or perceived conflict between my personal or financial interests and this Competition as set out below:

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Attach separate sheets if necessary

- (b) I declare that I am an immediate family member, business partner or associate of a member involved in this Competition listed in **Annex 4** and our relationship / association is listed below. (Please also state the frequency of contact and the usual occasions of contact, etc.)

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Attach separate sheets if necessary

2. I consent and hereby authorise the Competition Advisor and any of its authorised officer to investigate and verify any information of my declaration provided herein with any third parties.
3. I declare that all information stated on this Form together with any information provided to the Organising Committee are correct, true and complete.

### Declared and undertaken by:

Name of Declaring Participant's / member of Team Participant Name : \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

Confidential Registration Number

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