**HKEx Information Services Limited**

*(A wholly-owned member of the Hong Kong Exchanges and Clearing Limited Group)*

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| Test Participation FormSite Failover Rehearsal for Market Data Systems on 18 APRIL 2015 |

**Notes:**

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| 1. Please complete and return this form to HKEx-IS by email to IVSupport@hkex.com.hk no later than **12:00 on Wednesday, 1 April 2015**
2. For enquiry, please contact Vendor Support Hotline at (852) 2211 6558.
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1. **Test Details:**

|  |  |  |
| --- | --- | --- |
| Test | : | Site Failover Rehearsal for Market Data Systems |
| Date | : | 18 April 2015 |
| Participation  | : | **Optional** |
| Systems | : | OMD-C, MMDH, OMD-D & IIS |

1. **Client Contact Details** *(please fill up the appropriate box)***:**

|  |  |  |
| --- | --- | --- |
| System | : |  |
| Participation  | : |  |
| Name of Test Contact | : |  |
| Email Address | : |       |
| Contact No | : |        |
| Mobile Phone No | : |        |
| System | : |  |
| Participation  | : |  |
| Name of Test Contact | : |  |
| Email Address | : |       |
| Contact No | : |        |
| Mobile Phone No | : |        |
| System | : |  |
| Participation  | : |  |
| Name of Test Contact | : |  |
| Email Address | : |       |
| Contact No | : |        |
| Mobile Phone No | : |        |

**Submitted for and on behalf of the Client:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company** | **:** |  |  |
| **Name** | **:** |  |  |
| **Title** | **:** |  |  |
| **Contact No.** | **:** |  |  |
| **Date** | **:** |  |  |