

Membership Application / Renewal Form

To facilitate processing, please complete this form in English.

Name: _____

Name in Chinese: _____ Sex: _____

Application for Life / Full * membership or Membership No.: _____ (for renewal)

HK ID No.: _____

Degree (CUHK) obtained (can choose more than one): (Full-time / Part-time *)

* BN * PGDip * MN * MPhil * PhD

* Others: _____

Year of graduation: _____

Home Address: _____

Correspondence Address: _____

Working Institution (and ward/unit): _____ Post: _____

Telephone: (Office) _____ (Home) _____

Fax: _____ (Home / Office *) Email: _____

Mobile / Pager: _____

Signature: _____ Date: _____

** Delete whichever is inappropriate*

Please note that the information provided will be only used by the Association as record and for correspondence purpose. This personal information will not be disclosed to outside party under any circumstances.

Membership Fee:

1. Admission fee: HK\$ 50.00 (for new application for membership)
2. Full member fee: HK\$ 75.00 per year
3. Life member fee: HK\$ 500.00

Payment method:

- a. Crossed cheque payable to “The Chinese University of Hong Kong Nursing Alumni Association” **or**
- b. Cash payment deposited to the Hang Seng Bank Ltd. account: **290-066562-001.**

The deposit receipt or the crossed cheque, together with the membership application/renewal form will be sent to: *The CUHK Nursing Alumni Association, 8/F., Esther Lee Building, Chung Chi College, The Chinese University of Hong Kong, Shatin, N.T.* (Attn. Prof. W.Y. Ip, Associate Professor)

Thank you!! Look forward to receiving your application and support.

For any enquiry, please contact our Secretary Mr. Simon LAM (Tel: 78880411) or Chairperson Ms. Yuen Pui-Shan (Tel: 93419965).