

# HONG KONG UNIVERSITY ALUMNI ASSOCIATION

香 港 大 學 校 友 會

Room 101 Yip Fung Building, 2 D'Aguiar Street, Central, Hong Kong.  
Membership Service Tel: 34211218 Fax: 2523 2660  
Email: [membership@hkuaa.org.hk](mailto:membership@hkuaa.org.hk) Website: [www.hkuaa.org.hk](http://www.hkuaa.org.hk)

## SUBSCRIBING MEMBERSHIP APPLICATION FORM

Please fill in all details & send it back to the Association at the above address/ fax/ email for processing.

**Full Name:** In English (Prof./Dr./Mr./Ms./Mrs.) \_\_\_\_\_ (Surname), \_\_\_\_\_ (Given Name)  
(as HKID/ Passport) In Chinese \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ (dd)/ \_\_\_\_\_ (mm)/ \_\_\_\_\_ (yyyy)

**Gender:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Graduation Sch./ Uni.:** \_\_\_\_\_ *(if you are HKU graduate, please apply for Ordinary/ Life Membership)*

**Subject/ Degree(s):** \_\_\_\_\_ **Year(s) of Graduation:** \_\_\_\_\_

**Company/ Organization:** \_\_\_\_\_ **Position Held:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_ **Tel:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

I, the undersigned, hereby declare that the information provided therein is true and genuine, and accept the terms and conditions for membership services. I hereby agree, if accepted to become a member, to be bound by the Memorandum and Articles of Association and the bye-laws of the Association.

- I hereby authorize the Hong Kong University Alumni Association (HKUAA) to confirm my personal details with The University of Hong Kong for the purpose of this application.
- I acknowledge that applications who failed to submit supporting document and correct personal information will be subject to delay in processing, or application being declined.
- I acknowledge that HKUAA reserves all rights to make ultimate decision on all membership application related decisions.
- I acknowledge that HKUAA may process or pass my personal data within the Association or to its respective authorized independent agents. HKUAA maintains strict security controls designed to prevent unauthorized access to my personal data by anyone, including its staff.
- I acknowledge that HKUAA reserves the right to make amendments of the terms and conditions for membership services from time to time.

Signature of Applicant : \_\_\_\_\_

Hong Kong ID Card No./ Passport No.: \_\_\_\_\_

Date (dd/mm/yyyy) : \_\_\_\_\_

## Nomination Form for Subscribing Member

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Note: Applicant must complete this section before submission. Both Proposer and Secunder **MUST** be current HKUAA Life / Ordinary Members.

We, the undersigned, hereby nominate the above named applicant who is personally known to us and we believe him/her to be a suitable person to be accepted as a Subscribing Member of Hong Kong University Alumni Association.

**Name of Proposer:** *(In block capitals)*

HKUAA Member No. /HKID: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile No: \_\_\_\_\_

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

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

*(dd/mm/yyyy)*

**Name of Secunder:** *(In block capitals)*

HKUAA Member No. /HKID: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile No: \_\_\_\_\_

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

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

*(dd/mm/yyyy)*

## **Application Guidelines:**

Please complete the above application form and submit with payment to the above address/  
fax/ email membership@hkuaa.org.hk :

*(Note: Entrance Fee is HK\$3,000 and the Annual fee is HK\$2,400 for HKUAA Subscribing Member. If you have any problem on payment amount, please confirm with us at 34211218 before payment. Application is subject to the approval of HKUAA Executive Committee.)*

### **Payment method:**

#### **Payment Method 1 - Deposit to our HSBC Account (by ATM, Counter or Online)**

HSBC Account No: 808-5-000324

Account Name: Hong Kong University Alumni Association

\*\*\*After you pay, PLEASE SCAN YOUR receipt and email us. Please KEEP your receipt.

#### **Payment Method 2 - Credit Card (we accept ONLY Visa or Master)**

Please note that by sending email to us with your credit card information, Hong Kong University Alumni Association (HKUAA) is authorized to charge the amount indicated by you from your credit card.

Please provide us with the following credit card information for processing payment (MUST use your own credit card):-

Cardholder Name (Same as printed on credit card):

Credit Card Type (Visa / Master):

Credit Card Number:

Credit Card Expiry Date:

Amount to be charged (HK\$):