

HONG KONG UNIVERSITY ALUMNI ASSOCIATION



香港大學校友會

Room 101 Yip Fung Building, 2 D'Aguiar Street, Central, Hong Kong.
Tel: 2522 7968; 2523 0789 Membership Service: 3421 1218 Fax: 2523 2660
Email: hkuaa@hkuaa.org.hk Website: www.hkuaa.org.hk

ASSOCIATE MEMBERSHIP APPLICATION FORM

(Please fill in all details & send it back to the Association at the above address for processing. You must be a current or past Court, Council, or Foundation Member, or a Term I or Term II Staff Member of HKU to qualify for this category of membership)

(Dr. / Mr. / Mrs. / Ms.)

FULL NAME : in English _____

in Chinese _____ **Sex:** _____

Date of Birth (dd/mm/yyyy) : _____ **HKU Connection*:** _____

Degree(s) : _____ **Year(s) of Graduation:** _____

Name of University: _____

Occupation : _____ **Mobile No.** : _____

Address : (Please ✓ in as appropriate for future correspondence.)

Residence: _____

Tel: _____ Fax: _____

E-mail: _____

Office: _____

Tel: _____ Fax: _____

E-mail: _____

I, the undersigned, hereby authorize HKUAA to confirm my personal details with HKU for the purpose of this application and I hereby agree, if elected to become a member, to be bound by the Memorandum and Articles of Association and the bye-laws of the Association.

Signature of Applicant : _____

Hong Kong ID Card/Passport No.: _____

Date : _____

*(Please specify whether you are a current or past Court, Council, or Foundation Member, or a Term I or Term II Staff Member of HKU.)