

LIU PO SHAN MEMORIAL COLLEGE ALUMNI ASSOCIATION

廖寶珊紀念書院校友會

MEMBERSHIP ADMISSION FORM

入會申請表

CONFIDENTIAL (For internal use only)
機密文件 (資料只作內部聯絡用途)

Membership No. (Official use only): _____
會員編號 (只供本會用)

請用英文正楷填寫 (Please use **BLOCK LETTERS**)

Name: (Surname First) _____ (English) _____ (中文)
姓名 (姓氏先寫)

Sex: _____ M/F
性別

Date of Birth: _____
出生日期 (DD / MM / YY)

Contact Tel. No.: _____ (Day) _____ (Night)
聯絡電話 (日間) (晚間)

Correspondence Address: _____
聯絡地址

E-Mail / MSN: _____
電郵地址

Occupation: _____
職業

Name of Company: _____
公司名稱

Position: _____
職位

Year of Graduation: _____
畢業年份

Class upon Graduation: _____
最後就讀班別

Last school attending / attended: _____
現/曾就讀學校

Faculty / Department: _____
現/曾就讀課程及年級

* The admission fee is **HK\$70.00**. Please deposit the amount into **Hang Seng Bank A/C No. 330-211780-001** (account name: **Liu Po Shan Memorial College Alumni Association**) or mail the cheque payable to **Liu Po Shan Memorial College Alumni Association**.

* 入會費為港幣七十圓正。請將款項存入恆生銀行戶口 **330-211780-001** (戶口名稱為廖寶珊紀念書院校友會) 或郵寄支票, 支票抬頭請寫「廖寶珊紀念書院校友會」。

** Please return the Admission Form and the bank receipt or cheque to Ms. Chan Lai-man, Liu Po Shan Memorial College, Luk Yeung Sun Chuen, Tsuen Wan.

** 填妥表格後, 請將表格、銀行收據或支票寄回荃灣綠楊新村廖寶珊紀念書院陳婉婷老師收。

For enquiries, please contact Ms. Chan Lai-man (Tel.: 24996711) or Mr. Keung Kwok-wai, Chairperson of the Alumni Association (Tel.: 92501007, e-mail: bear1007@yahoo.com).

如有任何疑問, 請與陳婉婷老師 (電話: 24996711) 或校友會主席強國偉 (電話: 92501007, 電郵: bear1007@yahoo.com) 聯絡。