



APPLICATION FOR MEMBERSHIP – \*New / Renewal

This form should be completed and returned by mail or email.

Secretariat office: Unit 3C, Worldwide Centre, 123 Tung Chau Street, KLN

Email: [info@hkobesity.com](mailto:info@hkobesity.com)

Name (Surname first) \_\_\_\_\_ 中文姓名: \_\_\_\_\_ Sex: \*M / F

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

E-mail: \_\_\_\_\_ Tel: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Profession:  Doctor  \*Medicine / Surgery (Subspecialty: \_\_\_\_\_)

Others: \_\_\_\_\_ (Subspecialty: \_\_\_\_\_)

Nurse  Dietitian  Physiotherapist  Others: \_\_\_\_\_

Practice:  Public  Private Department \_\_\_\_\_ Institution \_\_\_\_\_

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| <p><b>Membership:</b> I wish to <u>* apply / transfer</u> to be <u>*a/an</u></p> <p><input type="checkbox"/> Ordinary member<br/> <input type="checkbox"/> Associate member<br/> <input type="checkbox"/> Student member</p> |
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- Note:
- For new membership, application will only be processed with the correct payment.**
  - Application fee – (Ordinary Member) HK\$800; (Associate member) HK\$300/year; (Student member) HK\$100/year.
  - Please settle the Application Fee by either one of the following methods:
    - Crossed cheques should be payable to “Hong Kong Obesity Society Limited” and sent to Unit C, 3/F, Worldwide Centre, 123 Tung Chau Street, Kowloon together with this application form.
    - Bank Transfer (Details will be sent to successful applicants)
  - An associate member can change status to an ordinary member upon payment of the annual subscription fee for 3 consecutive years.
  - Receipt will be issued to successful applicants after the next council meeting.
  - Your name & address may be used for the sole purpose of organization of scientific and related activities.

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_

[For staff use only] Bank: \_\_\_\_\_ Cheque no. \_\_\_\_\_ Received by: \_\_\_\_\_

Endorsed by Council: Yes / No Date: \_\_\_\_\_