For those wishing to be Members

of the

## HONG KONG FAMILY LAW ASSOCIATION

Membership Application Form

Name of Applicant : (Surname underlined) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title (MR/MRS/MISS/MS/DR) HKID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correspondence address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Occupation and Date of Qualification, if applicable : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Name and address (if applicable) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Telephone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Fax # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

# **Membership Year runs from 1st March – 28th February (the following year)**

**Membership Fee**:

Joining Fee: HK$100

* Student Members: Free

Annual Subscription:

* HK$200 (HK$100 if you join on or after 1st September)
* Student Members: HK$100

**A cheque for the appropriate amount should be attached to this form.**

- I agree to support and further the objects of the HKFLA.

- I do/do not want to join a HKFLA Working Party Group

- I am interested in the area of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in so far as it relates to Family Law.

*Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Applicant :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Name of Proposer : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Proposer : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Name of Seconder : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Seconder : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Please return this form to the Secretary, Hong Kong Family Law Association, c/o G. P. O. Box No.11417, Hong Kong with your cheque in the appropriate made payable to THE HONG KONG FAMILY LAW ASSOCIATION.

*You will be notified within 6 weeks upon receipt by the Committee of the Association of your application form or as soon as practicable after the Committee has approved/confirmed your election as a member.*