



Members' Information Modification Form

FOR INDIVIDUAL MEMBERSHIP

(Applicable to: Fellow Members, Professional Members, Associate Members, Graduate Members, Affiliate Members and Student Members)

Membership No.: _____	
Name in Full: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss _____	
Name in Chinese: _____	
<i>*Please fill in the field that needed to be modified</i>	
Company Name: _____	
Job Title: _____	Industry: _____
Address in English: _____ _____	
Address in Chinese: _____ _____	
Tel (Office): _____	Mobile: _____
Fax: _____	Email: _____
Signature: _____	Date: _____

Please post, fax or email the completed form to Hong Kong Logistics Association.

HONG KONG LOGISTICS ASSOCIATION

Unit 11, 3/F, Tins Enterprises Centre, 777 Lai Chi Kok Road, Cheung Shan Wan, Hong Kong

Telephone: (852) 2777 9656, Fax: (852) 3421 2477

Email: admin@hkla.org.hk Website: www.hkla.org.hk