

Life Membership for Senior Member Application Form

Members aged 65 or above are eligible to apply for Life Membership. Please complete this form together with HKID/passport photocopy to HKLA administration office by fax 34212477 or by email to member@hkla.org.hk.

Personal data of Applicant

Membership No. : _____ Date of joining HKLA: _____ (yy/mm/dd)

Name (English) : _____ Name (Chinese) : _____

Title: ☐ Prof. ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms ☐ Other (please specify) : _____

Correspondence address (English) : _____

Mobile : _____ Tel. (☐ Home/ ☐ Office) : _____

Email : _____ Fax (if any) : _____

Date of birth: _____ Year _____ Month _____ Day (please attach copy of HKID/Passport)

Declaration and undertaking

I, the undersigned, DECLARE that the information in the above items is true.

Applicant's Signature : _____ Date of Application : _____

For office use

Approved by:

Chairman, Membership Committee _____ Date : _____