

## **Membership Form**

## **Personal Information**

Name: *Mr. /Ms. /Mrs.		
Name: *Mr. /Ms. /Mrs	Name)	(Last Name)
Company/ Organization:		
Position:		
Address:		
Tel:	(Office)	(Mobile)
E-mail:	Fax: _	
Signature:	Date	e:
Remarks		
<ul> <li>A. Membership Duration &amp; Fee</li> <li>1. Membership fee is HKD\$500 per year</li> <li>2. The membership period is on a 12-received.</li> <li>3. Membership is non-transferable; and</li> </ul>	-month basis,	starting from the date when payment is fees are non-refundable.
<ul><li>B. Personal Data Collection</li><li>1. All personal data will be kept confiden</li><li>2. Personal data collected is only used to latest news of Ednovators.</li></ul>		g applications for membership and sending
or by email at <a href="mailto:ednovators@gmail.com">ednovators@gmail.com</a> 2. For more information about Ednovator facebook page at <a href="www.facebook.com">www.facebook.com</a>	<u>n</u> . ors, please vi: <u>n/ednovators</u> .	Ednovators Ms. Tracy Chan at 9019 9580 sit our website at <a href="www.ednovators.com">www.ednovators.com</a> or
[For Official Use Only]		
Membership fee received in: □ Cash	☐ Cheque [Cl	neque No:]
Received date:	Receipt No.:	
Confirmed by:		