

## APPLICATION FORM FOR STUDENT MEMBERSHIP

INTERNET: <http://www.hkma.org.hk/membership> E-MAIL: [membership@hkma.org.hk](mailto:membership@hkma.org.hk)  
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PLEASE TYPE OR COMPLETE THE APPLICATION FORM IN BLOCK LETTERS.

### Personal Details:

Title:  Dr  Professor  Mr  Mrs  Miss  Ms

Family Name: ..... Other Names: .....

Name in Chinese: ..... Nationality: .....

HKID No: ..... Date of Birth: ..... Age: .....  
yy / mm / dd

Home Address:.....  
.....

Tel No.: ..... Mobile Phone No.: .....

Fax No.: ..... E-Mail: .....

### School Details:

Name of College / University:.....

Address: .....

Tel:..... Fax: ..... Email:.....

Department / Faculty: .....

Year of Study: ..... Expected Date of Completion: .....

Degree / Diploma Expected: .....

### Reference:

Please give full details of two persons who will act as your referees.

1. Name:.....

2. Name:.....

Company: .....

Company: .....

Position: .....

Position: .....

Tel No.: ..... Fax No.: .....

Tel No.: ..... Fax No.: .....

E-mail: .....

E-mail: .....

Member of HKMA: Yes  No

Member of HKMA: Yes  No

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**Membership Fee: Free of Charge**

If admitted to membership of The Hong Kong Management Association (HKMA) in the category which the Council considers appropriate, I agree to abide by such rules and regulations of the Association as may be laid down by the Council from time to time. I understand that the Council may refuse any application and is not bound to state the reasons for doing so.

I shall comply with the HKMA Privacy Policy Statement, the Hong Kong Personal Data (Privacy) Ordinance (Cap.486) and other related regulations which will be changed from time to time. I declare that the data given in support of this application are, to the best of my knowledge, true, accurate and complete. I understand that the data will be used in the application process and that any misrepresentation, omission or misleading information given may disqualify my application for membership.

I understand that, upon my application, the data will become part of the HKMA record and may be used and processed for all lawful purposes relating to my academic and/or non-academic activities in accordance with the established policy of the HKMA and the Hong Kong Personal Data (Privacy) Ordinance (Cap.486).

I expressly consent that the personal data will be used for the HKMA administrative, academic, research, statistical, alumni activities and prescribed purposes as allowed by HKMA and the laws of Hong Kong from time to time.

Declaration

I authorize the HKMA to use my data to keep me informed of any direct marketing information including training and education programmes, awards and competitions, membership, alumni, promotional activities and other services and activities that it may arrange.

Please tick the box to indicate your consent.

Please tick the box to indicate your objection.

Applicant's Signature: ..... Date: .....

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FOR ASSOCIATION RECORDS ONLY

Approved at the ..... Meeting of the Council held on .....

Membership No.: ..... Class .....