



Hong Kong Society of Endocrinology, Metabolism and Reproduction

MEMBERSHIP APPLICATION FORM

I wish to *apply / transfer to be *a/an

Life Member

Student Member

* Delete as appropriate

Ordinary Member

Overseas Member

Associate Member

of Hong Kong Society of Endocrinology, Metabolism and Reproduction.

Title: _____ **Surname:** _____ **Given name:** _____

Correspondence Address: _____

Tel. No.: _____ **Fax No.:** _____ **Email:** _____

Signature: _____ **Date:** _____

Academic/Professional Qualifications

Institution: _____ **Degree:** _____ **Date Awarded:** _____

Present Position: _____

Relevant experience and work done in endocrinology, metabolism and reproduction:

1. _____
2. _____
3. _____

Proposer Name: _____ **Signature:** _____

Seconder Name: _____ **Signature:** _____

Completed application form with a crossed cheque for membership fee made payable to "HKSEMR" should be sent:

By post to: Dr. Victor HF Hung, Honorary Secretary, HKSEMR

c/o Medical C Unit, Department of Medicine and Geriatrics, Princess Margaret Hospital,

2-10 Princess Margaret Hospital Road, Lai Chi Kok, Kowloon

Membership fees:

Life member \$2000; Ordinary member HK\$150/year; Associate member HK\$130/year

Student member HK\$30/year; Overseas member US\$10/year