



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: *Prof. Alice Kong, Honorary Secretary, HKSEMR*

c/o RM114028, 9/F, Lui Che Woo Clinical Science Building, Prince of Wales Hospital

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