

Membership Application Form 會員申請表

Membership Category 會籍類別: Associate Members 附屬會員

Personal Particulars 個人資料† (Please see note 請參閱附註)

Title 稱謂: Mr. 先生 Mrs. 太太 Ms. 女士 Miss 小姐 Dr. 博士 Prof. 教授 Sex 性別: Male 男 Female 女

Name 英文姓名: _____ Name in Chinese 中文姓名: _____
(Last Name 姓氏) (First Name 名稱)

HKID 香港身份證: _____ Date of Birth 出生日期: _____
(First 5 alpha-numerical characters 只需填寫首5位英數字元) (Month 月) (Year 年)

Correspondence Address 通訊地址: _____ Contact No. 聯絡電話: _____

Email Address 電郵地址: _____ Remarks 備註: _____

I understand that my membership application for the Friends of the Imperial Museum shall be subject to the approval of the Imperial Museum Limited ("IM"). IM has the absolute discretion to approve or reject the said application without giving any reason therefor. IM's decision is final in all circumstances. I agree to, as a member, observe all Members' Rules and Regulations applicable to the Friends of the Imperial Museum and I shall respect the rights of other members. I understand my membership may be terminated immediately for violating any rule under the Members' Rules and Regulations, depriving other members of their respective rights, misconducts or improper acts causing damage to the reputation of IM.

本人明白本人之「博物館之友」會籍申請須經皇家博物館有限公司(「皇家博物館」)批核;皇家博物館有權決定是否接納本人之會籍申請,而毋須給予任何理由,一切最終結果以皇家博物館決定為準。成為會員後,本人會遵守所有適用於「博物館之友」會員之會員守則,並尊重其他會員之權利;本人明白若違反會員守則之任何條款、剝奪其他會員之合理權利,或作出任何不適當行為或對皇家博物館聲譽造成損害,本人會籍可被即時取消。

I hereby declare that the information given in this form is true and correct. I have read and agreed to be bound by the Members' Rules and Regulations of the Friends of the Imperial Museum published at the website www.imperial-museum.org. (Applicants / members may request a printed copy of the said rules in writing to IM, in which case applicants / members have to enclose a return envelope with sufficient postage.)

本人聲明以上所述資料均屬真確無誤,並已細閱及同意皇家博物館有限公司載於網站 www.imperial-museum.org 「博物館之友」之會員守則(申請人/會員亦可向皇家博物館索取會員守則印刷本,若需印刷本,請以書面通知皇家博物館,並提供已繳足郵費之回郵信封,以作安排)。

I agree to receive updates and marketing information from the Imperial Museum from time to time.

本人願意接收皇家博物館日後之宣傳推廣資料。

Signature of Applicant 申請人簽名: _____ Date 日期: _____

Name of Proposer / Nominator 推薦人/提名人姓名: _____ Membership No. (會員編號: _____) Must be a member of Friends of the Imperial Museum 須為「博物館之友」會員

Contact No. 聯絡電話: _____ Email Address 電郵地址: _____ Signature of Proposer / Nominator 推薦人/提名人簽名: _____

Please return the completed form to: Imperial Museum Limited, 6/F Eltee Building, 3 Ning Foo Street, Chai Wan, Hong Kong

填妥表格後請寄回: 香港柴灣寧富街三號誠興大廈六樓皇家博物館有限公司

For any enquiries, please call 2810 9595. 如有任何查詢,請致電2810 9595。

† Note: Personal Data (Privacy) Ordinance: All information provided in this form will be used by IM for membership matters and related activities. In addition, IM may use the collected data for statistical research and analysis, and for keeping members informed of its news and services. The provision of personal data by means of this form is voluntary. However, insufficient information may result in rejection of this application. Applicants may access, correct or update their personal data kept by IM in writing to the membership secretary of IM.

附註 《個人資料(私隱)條例》:閣下在本表格所提供的資料將用作處理皇家博物館的會籍事宜及有關活動之用。同時,皇家博物館可把所收集的資料統計研究及分析,以及用以通知會員各項最新消息或服務。閣下在本表格所提供的個人資料,純屬自願,惟閣下若提供資料不足,可能導致閣下的申請被拒。申請人可查閱皇家博物館有限公司所保存有關閣下的個人資料,以及要求修改或更新。如有需要,請以書面與皇家博物館會籍秘書聯絡。

For Official Use Only 此欄由本會填寫					
Handled By 經手人	Application No. 申請編號	<input type="checkbox"/> Approved 批准 <input type="checkbox"/> Rejected 拒絕	Membership No. 會員編號	Date of Membership Start 會籍生效日期	Date of Membership Expire 會籍到期日

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