

Ming Wai Alumni

Membership Application Form

Reference Number: _____

Chinese Name: _____ English Name: _____

Sex: ☐ Male ☐ Female

Address: _____

Phone: _____ Mobile: _____ E-mail: _____

Service organizations: _____ Occupation: _____

Grade: _____ Alumni Year of Graduation: _____

Education: ☐ Associate Degree _____ ☐ Secondary School _____
☐ Primary School _____

I am willing to participate in alumni volunteer work: ☐ Yes

Application Procedures and Conditions:

1. Please complete the application form together with the permanent membership fee of HK\$300 in cash or via crossed cheque payable to "Ming Wai Alumni Association". Both the form and payment must be submitted or sent to Ming Wai International Kindergarten school office. (Shop 1, G/F & 1/F 5-13 Tsz Tsz Mui Road North Point, Hong Kong)
2. To make any changes regarding personal information please promptly inform the alumni. All personal information provided will be kept confidential.
3. If you have any inquiries, please call 25908038 or email mingwaialumni@gmail.com.
4. Members under 18 years must be signed under a guardian.
5. I would like to join Ming Wai Alumni Association Member; also carefully read the "Personal Data (Privacy) Ordinance - Personal Information Collection notices" and fully understand and agree to the collection of personal data for Ming Wai Alumni purposes.

(I declare that the above information is true, I am aware of the Ming Wai Alumni rights and obligations of membership, and agree to abide by the code of ethics.)

Applicant or Guardian: _____

Date: _____

For Office Use Only

Application No.: _____	Receipt No.: _____
Received Payment: _____	Bank-in-Date: _____
Handle By: _____	Date: _____