

APPLICATION FOR MEMBERSHIP HONG KONG INSTITUTE OF OCCUPATIONAL AND ENVIRONMENTAL HYGIENE

Instruction:

- A. Complete the form in block letters. Applicants for affiliated members as firm, company and association need to fill in sections 1, 3,4(B), 4(C), 9 and 10.
- B. Send the form with the copies of supporting documents and the application fee (HK\$100) by a crossed cheque payable to “Hong Kong Institute of Occupational and Environmental Hygiene”. The postal address is HKIOEH, P.O. Box 9645, General Post Office, Central, Hong Kong.

1. CATEGORY OF MEMBERSHIP

(Please tick at the box below for the membership grade you wish to apply)

	Member	Subscription \$300
	Associate Member	Subscription \$200
	Affiliated Member - Individual Person	Subscription \$100
	Affiliated Member - Firm/Company/Association	Subscription \$3000

	Membership upgrade	From:	To:
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2. PERSONAL INFORMATION

Surname: _____ First Name: _____

Name in Chinese (if applicable) _____ Sex: _____

Date of Birth: _____ (day/month/year)

3. PARTICULARS OF REPRESENTATIVES (to be completed only by applicants for Affiliated Member - Firm/Company/Association)

Name	Position	Phone/Fax No.	Correspondence Address
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** This is the main contact person to whom correspondence will be sent.

4. (A) Home Address

Telephone: _____

(B) Office Address

Telephone: _____

(C) Correspondence Address/Email Address/Fax Number

5. EDUCATION

Degree/Diploma/Certificate	Institute	Period
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Professional Qualifications/Membership of other Professional Organization

6. PROFESSIONAL EXPERIENCE

(A) Current (or most recent) Post/Title: _____

Employer: _____

Years in the position: _____ Period: From _____ To _____

Duties and Responsibilities _____

The % of time spent on Occupational/Environmental Hygiene Work: _____%

(B) Previous Post(s)/Title(s) (attach information on additional sheets if necessary)

Employer(s): _____

Years/Period in the position: _____

Duties and Responsibilities: _____

7. Publications

8. REFEREES

(1) Name: _____ Telephone: _____

Position/Company _____

Contact Address: _____

(2) Name: _____ Telephone: _____

Position/Company: _____

9. DECLARATION

I hereby apply for membership of the Hong Kong Institute of Occupational and Environmental Hygiene and I certify that the information I have provided in this application is accurate. A bank draft /cheque (No. _____) of the amount HK\$ 100.00 addressed to the Hong Kong Institute of Occupational and Environmental Hygiene is enclosed for payment of the application fee which is not refundable. I also agree that my academic qualification and professional experience be entered into the Register and may be made available to Members of the Institute.

Signed _____ Date _____

10. PERSONAL DATA (PRIVACY) ORDINANCE

I authorize the HKIOEH to enter my correspondence address, contact number, email address, fax number, employer particulars, position held and membership category into the directory published and updated by the Institute from time to time. The above authorization may be withdrawn by giving one month's advance notice in writing to the Secretariat or automatically on termination of membership with the Institute.

(If you do not wish to sign this section, only your name will be entered into the directory under the appropriate membership category)

Signed _____ Date _____