香港心血管介入學會
Hong Kong Society of Transcatheter Endo-cardiovascular Therapeutics
(incorporated in Hong Kong with limited liability)

Membership Application Form

English Name:	Chinese Name:
Sex: □ Male □ Female	Current practice: □ HA □ University □ Private
Birthday(day/month): /	Membership: □ Full member □ Associate member □ International
Correspondence Address:	
Mobile number:	Fax number:
Email:	Payment Method : □ Cheque (bank / no.) _____

- Full membership should be registered physician in Hong Kong.
- Associate membership is open to all applicants.
- International membership is open to all applicants in overseas.

For Full and Associate members: entrance and annual fee is HK$300 and HK$100 respectively.

For International member: entrance and annual fee is US$100 and US$50 respectively.

Signature of applicant: _____ Date:_____

Notes:

1. Cheque by mail : The cheque must be a crossed cheque made payable to " **Hong Kong Society of Transcatheter Endocardiovascular Therapeutics Limited**", mail the cheque together with this form to **7/F, Administration Office, Yan Chai Hospital Multi-services Complex, 18 Yan Chai Street, Tsuen Wan (Attn: Ms. Wandi Lai).**
2. Cash will not be accepted.
3. **Entrance and annual Membership fee of 2015-2016 is waived.**