

香港麻醉科學會有限公司 The Society of Anaesthetists of Hong Kong Limited

2022 Membership Application / Renewal Form

I, the undersigned, wish to [apply/renew]* for [Ordinary/Ordinary (Trainee)/Associate/ Life membership]* of The Society of Anaesthetists of Hong Kong Limited ("SAHK"); and hereby furnish to the Council the required information in this form. **please delete as appropriate*

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Name:	artici	liars		
	Pleo	se underline family name	Gender F / M Please circle as appropriate	
State of Practice: Please tick in the appropriate box				
		I am now practicing ov I am not practicing any		
Qualification(s):				
Email Address:			Mobile:	
Mailing Address:				_
		ership Application only ry Members support my		
Name:			Signature:	
Name:			Signature:	
constitution of SAH	K and	l the rules and regulatic	f the new membership applicant, hereby ons promulgated by the Council fr	
Signature of the Applicant:			Date:	
Part C: Membership Fee Schedule Ordinary Member Ordinary Member (trainee)			HK\$150/year HK\$75/year (fee waived for novice train	ee in first year)
Associate Member (non-anaesthetist) Life membership (fellow)			HK\$75/year HK\$1500 (one-off)	
Payment Methods:				
Via direct bank transfer: Bank name: China Construction Bank (Asia) Corporation Limited Account name: The Society of Anaesthetists of Hong Kong Limited Bank code: 009 Account number: 855000401175014 Please email the completed form and payment proof to SAHK Secretariat (secretariat@wittsnpartners.com).			By cheque: Post a crossed cheque payable to "The Society of Anaesthetists of Hong Kong Limited" (with your full name and phone number on the backside of the cheque) and the completed form to SAHK Secretariat at Unit 1612, 16/F, Concordia Plaza, 1 Science Museum Road, Tsim Sha Tsui, Kowloon, Hong Kong	By FPS: Pay with the FPS Number 169342946 or scan the QR code below then email the payment proof to SAHK Secretariat (secretariat@wittsnpartners.com)

All information provided in this form will be used by SAHK for the purposes of member administration, internal promotion and any other legitimate purposes as may be required, authorized or permitted by law. You have a right to request access to and correction of your personal data kept by SAHK. If you wish to exercise these rights, please email SAHK Secretariat at secretariat@wittsnpartners.com.