

九龍尖沙咀梳士巴利道 41 號 電話 Tel.: 2268 7000 41 Salisbury Road, Tsimshatsui, Kowloon

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CORPORATE MEMBERSHIP APPLICATION FORM

辦事處專用 FOR C	OFFICE USE ONLY
會 員 編 號 MEMBERSHIP NO.	
辦理人員/日期 HANDLE BY/DATE	
首 次 入 會 行 政 費 INITIAL ADM. FEE	
會 籍 年 費 ANNUAL FEE	
會 籍 費 用 MEMBERSHIP FEE	

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INSTI	CUCTIONS:	
1	read the Membership Information Sheet carefully as it communicates in part the rules, regulations and understanding of member sibilities. Please write in BLOCK LETTERS to complete this form. If submit the form by mail, please also enclose the following supporting ents:	
• A co	y of a valid Hong Kong Business Registration Certificate y of Sample Staff Identity Card plete information or missing supporting documents as requested will lead to delays in processing the application)	
	Type of Membership Plan : Standard Plan : Fitness Centre Plan Fitness Centre Premium Membership Plan	
1. (COMPANY PARTICULARS	
E	nglish Name	
(hinese Name	
Е	usiness Certificate No. : Business Nature :	
Correspondence Address:		
-		
Т	el. : Fax : E-mail :	
(ontact Person: Title:	
T	el. : Fax : E-mail :	
2. (ARDHOLDER PLAN (PLEASE CHOOSE ONE)	
Ţ	Plan A: All the membership cards bear no name and photo of the membership cardholders	
г	Dian R · All the membership cards hear name and photo of the membership cardholders	

☐ Plan C : Free combinations at the membership owner's decision

REFERENCES (Optional) 3. Please provide two references who can support your application by testifying to your goodwill and sincerity in applying to be an active YMCA member. Examples: YMCA members (please quote the membership no), Clergy, Professionals (doctor, lawyer, engineer, banker, etc.), Employer. Name: ______ Relationship with company: ______ Contact Tel./Membership No.: _____ Name: Relationship with company: Contact Tel./Membership No.: PERSONAL INTEREST / PROFILE (Optional) 4. (A) Volunteering Would you be prepared to volunteer for the YMCA? □ No ☐ Yes If Yes, Which of the following you would like to participate? ☐ Course instructor ☐ Serving on Community ☐ Assisting special events You are welcome to obtain a "Volunteer Opportunity Form" from Member Services. Please also indicate your expertise or skills: ☐ Language : ☐ Sports Skills: Camp leader / Others : ____ (B) Use of Facilities / Services Please indicate which of the following facilities will be of interest to you. Use 1 to indicate your strongest interest, 2 for your second strongest interest and so on. ____ Tennis ____ Swimming Pool The Haven ____ Basketball ____ Table Tennis Mall Café ____ Indoor Climbing Wall __ Badminton The DOOOR ____ Fitness Centre ____ Squash ____ Y Shop (C) Facility Utilization What time of day do you anticipate in using the YMCA facilities? From 9:00a.m. to 1:00p.m. Before 9:00 a.m. From1:00p.m. to 5:00p.m. After 5:00 p.m. (D) Religion If you do not have Christianity as your religion, please neglect this section.

Which denomination are you in? _____

Would you like to be active in one of the Christian Education / Worship programmes that we co-ordinate at the YMCA?

☐ Yes ☐ No

If Yes, can you specify your main interest:

- As a participant in a programme of any choice / interest.
- As a volunteer leader should the YMCA need help.

5. DECLARATION

I am in sympathy with the mission & objectives of the YMCA and agree hereby to abide and be bound by the Constitution, By-Laws and Rules of the Association until such time as my membership shall be terminated by resignation or otherwise. The YMCA of Hong Kong reserves the right according to the Constitution to accept or not accept the application presented. I understand once the application is approved, the Initial Administration Fee and Membership Annual Fee are non-refundable under any reasons.

		,
	Signature / Company Chop	Date
6.	PERSONAL INFORMATION COLLECTION STATEMENT	
	The information provided by you will be used for purposes re	elating to the administration in the
	Member Services Section.	
	This Section may give some of the information to other parties v	within the Association relating to you
	usage of our facilities and courses taken.	
	Subject to exemption under the Personal Data (Privacy) Ordinance	e, you have the right of access and
	connection with respect to personal data.	
	Request for personal data access and correction should be addresse	ed to Members Services Manager, and
	please quote your membership number.	
	Acknowledged by I	Date

EOD OFFICE LISE ONLY

Approved by _____

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For Management Approval	

Date _____