

Company Address 公司中文及英文地址	
Tel 電話	Fax 傳真
Home Address 住宅中文及英文地址	
Tel 電話	Fax 傳真
E-mail 電郵	Correspondence Address, Tel, Fax 聯絡地址電話傳真: <input type="checkbox"/> Company 公司 <input type="checkbox"/> Home 住宅
Name of Current Principal Company in Chinese and English 現時所屬主要公司中文及英文名稱	
Current Principal Position in Chinese and English 現時主要職位中文及英文名稱	
Company Main Activity (in 30 English characters maximum including spaces) 請參閱「本會會章」 Please see the application Note 公司主要業務 (以最多 15 中文字簡述)	

Your data are collected and used in connection with the activities of the Association. Your name, company/employer name, contact telephone and fax numbers will be published in the membership list which will be circulated to all members and firms, companies, organization or associations related to the security industry. Other data will be safely kept by the Association and will not be released to third party without your consent.

你的資料收集只會作為本會有關活動之用途。你的姓名、公司/僱主名稱、聯絡電話傳真號碼及專業資格將會公開刊錄於會員名錄內。此名錄將會寄給各會員，及有關保安行業的公司、機構或協會。其餘資料會方將作保密處理，除得到你的同意，所有資料將不會向第三者披露。

1. I/We undertake to pay all subscriptions in accordance with Association Rules.

本人/公司會根據會規支付年費。

2. I/We agree to abide by the Ethical Code of Conduct and the Constitution Rules of the Association.

本人/公司同意遵守協會的專業守則、會章及規條。

Declaration: I hereby apply for membership of The Asian Professional Security Association and agree to be bound by its Memorandum and Articles of Association.

宣言: 本人現申請成為亞洲專業保安協會-香港分會之會員，並同意遵守協會之組織大綱與章程。

Signature 簽名: _____

Date 日期: _____

* For details, please refer to our website. 詳細資料刊登在本會網頁。

Reference Persons Name

諮詢人姓名: _____

Tel _____ Fax _____

電話: _____ 傳真: _____

I, being APSA member, hereby propose the applicant.

本人現時乃亞洲專業保安協會-香港分會之會員，特推薦上述申請人。

Signature 簽名: _____

Date 日期: _____

申請辦法 How To Apply

請清楚填寫「會員申請表格」後遞回「亞洲專業保安協會-香港分會」，請附：-

劃線支票，抬頭人：「Asian Professional Security Association – Hong Kong Chapter」預付首年年費。

如申請不獲接納，本會將退款，惟不會支付利息。

本會為未提出推薦人之申請人士提供協助。

Please complete clearly the Membership Application Form and forward it to APSA. Please enclose:-

a crossed cheque payable "Asian Professional Security Association – Hong Kong Chapter" for First-Year Subscription Fee

Unsuccessful applicants will be refunded, but no interest will be paid on refund amounts.

APSA will assist those who are unable to find a sponsor.

Verification 資料審核
For Official Use Only (本會專用)

(1) Verification Of Company & Residential Address 公司及住址核實

Date Verified 核實日期	Method Verification 核實方法	Signature of Verifier 核實人簽署	Remarks 備註

(2) Verification Of Present/Former Employers 現任/前任公司核實

Date Verified 核實日期	Method Verification 核實方法	Signature of Verifier 核實人簽署	Remarks 備註

(3) Verification Of Introducer/Reference Persons 本會介紹人/諮詢人審核

Date Verified 核實日期	Method Verification 核實方法	Signature of Verifier 核實人簽署	Remarks 備註

To be completed by the Membership Committee 以下由會員事務部填寫		Payment Record 繳交會費紀錄		
Membership No. 會員編號		Fiscal Year 年份	Paid On 繳費日期	Cheque No./Bank Cash 支票編號/銀行/現金
Application Date 入表日期				
Interview Date 接見日期				
<input type="checkbox"/> Recommend to Executive Committee 可提交常務委員會				
<input type="checkbox"/> No Recommend to Executive Committee 不獲接納				
<input type="checkbox"/> Others 其他				
Approved by Member Committee 會員事務部批核				
Signature 簽署		Date 日期		
Date approved by Member Committee 常務委員會批核日期				
Withdrawal Date 退出日期:				
Withdrawal Reason 退出原因:				
Written Notice of Membership Withdrawal: 退出書面通知:				
Provided on 有提供_____日期				
(See Attachment) (見附頁)				
<input type="checkbox"/> Not provided 無提供				

Note : All membership shall only be effective upon approval of the Executive Committee.

註: 所有會籍必須經過常務委員會批核方為有效

