

Photo 照片

MEMBERSHIP APPLICATION FORM

Name : _____ 中文名 : _____
(Name in BLOCK LETTERS, underline surname)

NRIC 身份证 : _____ Sex 性别 : _____
(Last 4 Digit Number Only) Male / Femal

Address 地址 : _____

Date of Birth 出生日期 _____ Home Tel 住家电话 _____

Place of Birth 出生地 _____ Office Tel 办公室 _____

Nationality 国籍 _____ Handphone 手机 _____

Profession 职业 _____ Email 电子邮件 _____

As a non-profitable society, we depend the effort of every fellow member to improve the society in all aspects.

Therefor we would like to know if you are able to contribute in any of the following areas:

- | | |
|--|--|
| <input type="checkbox"/> Web Design & Manage Team | <input type="checkbox"/> Secretarial Work In English |
| <input type="checkbox"/> Exhibition Logistics Team | <input type="checkbox"/> Secretarial Work In Chinese |
| <input type="checkbox"/> Law Matters | <input type="checkbox"/> Publication Advertising Team:
Consolidate Exhibition Booklet
For Printing Design Shop |
| <input type="checkbox"/> Narrator | <input type="checkbox"/> Fund Raising Team |
| <input type="checkbox"/> Account Book Keeping | <input type="checkbox"/> Others : _____ |

Biography (Art Education, Exhibitions, Awards, other Art Societies membership etc) :

Year	Description

Signature of Applicant & Date 申请者签名及日期

Recommended by (must be a SWS member) :
Signature & Name of SWS member & Date

FOR OFFICIAL USE ONLY		
Remarks : _____		
Approved by :	Date :	Signature :