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| 入會申請表APPLICATION FORM FOR MEMBERSHIP | | | | |
| **單位資料COMPANY’S PARTICULARS** | | | | |
| 單位名稱Name of Company/Organisation | | | 電話號碼Telephone No | |
| 電郵地址Email | | | 網站地址Website | |
| 地址Address | | | 傳真號碼Fax | |
| 法定代表人姓名 Legal Rep (name) | | 法定代表人職務  Legal Rep (title) | 法定代表人身份證號 Legal Rep identity No. | |
| 公司成立日期Date of Incorporation | | | 主要業務Major Activities | |
| 公司註冊號碼Company Registration Number/IC | | | 公司註冊資金 Capital size | |
| 公司簡介 (Company introduction) | | | | |
| 申請會員類別  Membership selected | 副會長單位 Vice-President □ 常務理事單位Executive □ 理事單位Senior □ 會員單位Ordinary □ 海外會員單位Overseas □ | | | |
|  | | | | |
| **公司代表資料COMPANY REPRESENTATIVE’S PARTICULARS** | | | | |
| 姓名Name | | | 身份證號Identity Number | |
| 職位Designation in company | | | 出生日期Date of Birth | |
| 電話號碼Contact Number | | | 電郵地址Email address | |
| 微信通訊號Wechat ID： |  | | | |
| **申請人承諾 Acknowledgement of applicant** | | | | |
| 我司單位確認將會遵守國際健康發展聯合會的規章We hereby confirm that we will abide with the IFHD’s Rules and Regulations  簽署蓋章Signature of Applicant and Co. Stamp  日期Date | | | | |
| **審批FOR OFFICE USE** | | | | |
| 審批日期Date of Approval | 會員類別定位: Membership status approved  [ ] 副會長單位 Vice-President Member  [ ] 常務理事單位 Executive Member  [ ] 理事單位 Senior Member  [ ] 會員單位 Ordinary Member  [ ] 海外會員單位 Overseas Member | | | |
| 會長簽署Signature of Chairman | 副主席/秘書 簽署  Signature of Vice-Chairman  / Secretary | | | 聯合會印章 (IFHD stamped) |

**會費 Membership Fees**

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| **會員類別Type of Membership** | **入會費用Entrance Fee** | **年費Annual fee** |
| 副會長單位會員  Vice-President Member | HK$10,000 | HK$100,000 per year |
| 常務理事單位會員 Executive Member | HK$5,000 | HK$50,000 per year |
| 理事單位會員 Senior Member | HK$3,000 | HK$30,000 per year |
| 一般會員Ordinary  公司單位/協會Company/Organisation | HK$1,000 | HK$10,000 per year |
| 海外會員Overseas | HK$10,000 | HK$100,000 per year |

請把入會申請表（附：商業登記證/稅務登記證/營業執照/法定代表人身份證），公司代表的個人照片、身份證和個人簡歷連同相關的入會費、年費付款的憑證（劃付于“國際健康發展聯合會”） 寄送到**國際健康發展聯合會**辦事處 地址**香港葵湧梨木道79號亞洲貿易中心3202 室**。

Please submit your application ( together with a photocopy of Business Registration (or Tax ID and Legal Rep’s ID), a recent headshot photo & personal profile of your representative and his personal identity copy, payment of entrance fee and annual fee as above (**International Federation For Health Development** as payee**),** by post or courier to **International Federation For Health Development**, Room 3202 Asia Trade Centre, 79 Lei Muk Road, Kwai Chung, NT, Hong Kong

閣下如有任何查詢，請致電到本會秘書處，電話號+852 60170518. Should you have further queries, please do not hesitate to contact IFHD Secretariat at +852 60170518.