

## APPLICATION FOR INDIVIDUAL MEMBERSHIP

(Please type or print)

			Chinese Name:			
			E - Mail:			
Date of Birth:		MIM Student:	□ No □	Yes	(MIM Student No.:	_)
Mailing Address:						
Company Name:						
				e:		
Details of Present Duresponsibility.  Details of Past Experi		s should describe the	ir duties in t	terms	which will make clear the scope of their	
Dates		Position H	eld		Name of Organization	
From	to			_		
From	to			_		
From	to			_		
Details of Education	Professional o	qualifications / Institu	ution membe	ership	s:	
Dates		Qualification	Obtained		Name of Institution	
From	to			_		
From	to		<del> </del>	_		
From	to			_		

## Remarks:

- ASSOCIATE MEMBER, please submit the application form attached with the personal ID copy / blue card copy.
- FULL MEMBER, please submit the application form attached with the personal ID copy / Blue card copy and the copy of academic certificate(s).



## **MEMBERSHIP CATEGORY:**

FULL MEMBER	(WITH VOTING RIGHT)
	Full Member (Entrance Fee MOP 1,000.00; Annual Subscription MOP 400.00)
ASSOCIATE MEM	MBER (NO VOTING RIGHT)
	Associate Member (Entrance Fee MOP 500.00; Annual Subscription MOP 200.00)
I agree to abide by	pership of Macau Management Association in the category which the Council considers appropriate such rules and regulations of the Association as may be laid down by Council from time to time. Council may refuse any application and is not bound to state the reasons for doing so.
Date:	Applicant's Signature:
	FOR ASSOCIATION RECORDS ONLY
Approved at the	Meeting of the
Council held on	Membership No.