



**APPLICATION FOR ASSOCIATE MEMBERSHIP**

(Please type or print)

English Name: Mr./Mrs./Ms. Chinese Name: \_\_\_\_\_

Contact No.: \_\_\_\_\_ E - Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ MIM Student:  No  Yes (MIM Student No.: \_\_\_\_\_)

Mailing Address: \_\_\_\_\_

Current Working Status:  Unemployment  Employed (Please fill below)

Company Name: \_\_\_\_\_

Position: \_\_\_\_\_ Starting Date: \_\_\_\_\_

Details of Present Duties: Applicants should describe their duties in terms which will make clear the scope of their responsibility.

Details of Past Experience:

Dates		Position Held	Name of Organization
From _____	to _____	_____	_____
From _____	to _____	_____	_____
From _____	to _____	_____	_____

Details of Education / Professional qualifications / Institution memberships:

Dates		Qualification Obtained	Name of Institution
From _____	to _____	_____	_____
From _____	to _____	_____	_____
From _____	to _____	_____	_____

**Remarks:**

- ASSOCIATE MEMBER, please submit the application form attached with the personal ID copy / blue card copy.
- The entrance fee and annual subscription fee is NON-REFUNDABLE.



**澳門管理專業協會**  
**Macau Management Association**

**MEMBERSHIP CATEGORY:**

**ASSOCIATE MEMBER (NO VOTING RIGHT)**

Associate Member (Entrance Fee MOP 500.00 ; Annual Subscription MOP 200.00)

**\*\*\*The entrance fee and annual subscription fee is NON-REFUNDABLE.**

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If admitted to membership of Macau Management Association in the category which the Council considers appropriate, I agree to abide by such rules and regulations of the Association as may be laid down by Council from time to time. I understand that the Council may refuse any application and is not bound to state the reasons for doing so.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

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**FOR ASSOCIATION RECORDS ONLY**

Approved at the \_\_\_\_\_ Meeting of the \_\_\_\_\_

Council held on \_\_\_\_\_ Membership No. \_\_\_\_\_