



澳門管理專業協會
Macau Management Association

APPLICATION FOR INDIVIDUAL MEMBERSHIP

(Please type or print)

* Chinese Name: _____ * English Name: Mr./Mrs./Ms. _____

Date of Birth: _____ Nationality: _____ *E - Mail : _____

Home No.: _____ Company No.: _____ *Mobile No.: _____

Fax No.: _____ *MIM Student: No Yes (MIM Student No.: _____)

*Mailing Address: _____

*Company Name: _____

*Present Job Title: _____ *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 _____	_____	_____

Mandatory information (marked with *) must be included

Remarks: Please submit the application form attached with copies of academic certificate(s) (Full Member only) and your personal ID



澳門管理專業協會
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MEMBERSHIP CATEGORY:

FULL MEMBER (WITH VOTING RIGHT)

Full Member (Entrance Fee MOP\$1,000.00, Annual Subscription MOP\$400.00)

ASSOCIATE MEMBER (NO VOTING RIGHT)

Associate Member (Entrance Fee MOP\$500.00, Annual Subscription MOP\$200.00)

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: _____

FOR ASSOCIATION RECORDS ONLY

Approved at the _____ Meeting of the _____ Council held on _____
Membership No. _____ Class: _____