



Hong Kong Rehab Nursing Society
香港康復護理會

Membership Application Form

Please complete in BLOCK LETTER

Name in English:	中文姓名:	Sex:
Organization:	Department / Ward:	Post / Rank:
Corresponding Address :		Email :

Phone No. : (Home / Office) (Mobile)

Please indicate your membership type to be applied by inserting tick (✓)

Category of Membership	Eligibility	Membership Fee	Please tick
Entrance Fee	For New Join Member	HK\$ 50	
Life Member	Eligible to be Full Member	HK\$ 1,000	
Full Member	RN/ EN registered in HK Nursing Council who shows interest in Rehabilitation / Extended / Convalescent Care	HK\$ 100 /annum	
Associate Member	Other Health Care professionals who show interest in Rehabilitation / Extended / Convalescent Care	HK\$ 80 / annum	

By Post with Crossed Cheque payable to “**Hong Kong Rehab Nursing Society**” and mail to **PO Box 1555, Shatin Post Office** with this application form

Bank :	Cheque No.:	Total amount:
Signature	Date	

For Official Use Only

Membership Approved: Yes / No	Payment for : New Membership <input type="checkbox"/>
Payment Received: Yes / No	Renew Membership <input type="checkbox"/>