

Association of Women Accountants (Hong Kong) Limited

Suite B, 20th Floor, C.M.A Building, 64-66 Connaught Road, Central, Hong Kong

Tel: 6229 9628 / (86) 178 1749 9143 Website: <https://www.awahk.hk>

Membership Application Form

Name:	姓名 (中文):													
Company Name:	Position:													
公司名稱 (中文):														
Mobile No.:	E-mail Address:													
Work No.:														
HKID No. OR Passport No. and Place of Issuance:	Place of Residence:													
Business Address:														
Residential Address:														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;"><u>Professional / Educational Qualifications:</u> <u>Month/Year</u></th> <th style="width: 33%;"><u>Qualification</u></th> <th style="width: 33%;"><u>Issuing Organisation</u></th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			<u>Professional / Educational Qualifications:</u> <u>Month/Year</u>	<u>Qualification</u>	<u>Issuing Organisation</u>									
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Membership Application (note 1): ☐ Full Member ☐ Associate Member ☐ Full Member (≤ 5 years) ☐ Associate Member (≤ 5 years)		Referred by an existing member: 												
<i>Notes</i> 1. An applicant who is a resident in Hong Kong, a qualified accountant and a member of a professional organization can join the Association as Full Member. An applicant who is a non-resident in Hong Kong and an accountant can join the Association as Associate Member. Membership fee: (a) Full Member or Associate Member: HK\$ 1,000 (b) For those who became members of the AWAHK approved organizations for 5 years or less: HK\$500 If admitted, I agree to abide by the traditional code of professional etiquette in all dealings with my associates and the Association and to be bound by the rules and regulations of the Association from time to time in force as long as I remain a member. I also confirm that the details given in my application are true in all respect. 2. I understand and accept that the Association reserves the right to approve or reject the membership application of any individual. 3. I understand and accept that the Association reserves its right to check, when and where necessary, the validity of existing professional membership. 4. I understand and accept that my personal data is collected for the Association's administration and correspondence purpose only and is in accordance with the Personal Data (Privacy) Ordinance. This data might be used to inform me on any information organized by the Association. I enclose (i) a sum of HK\$ _____ for my membership fee, (ii) a recent photograph, and (iii) a copy of my current Certificate of Membership of my Professional Accountancy or Body Receipt for Membership Fee of current year of an Approved Accountancy Body or Copy of Membership card or Certification of professional accountancy membership from a CPA firm*. Payment can be made by cheque payable to "AWAHK" or by FPS (ID 108198060) or scanning FPS QR Code or through Payme.   Date: _____ Signature of Applicant : _____ <i>* Please provide at least one of these documents</i>														
For office use only _____ Date Certificate sent _____		Date Admitted _____ Membership No. _____												

Please send the completed form, the supporting documents mentioned above, and the cheque or payment confirmation for your membership fee to our registered office at **Suite B, 20/F C.M.A Building, 64-66 Connaught Road, Central, Hong Kong.**