

SOCIETY OF REGISTERED SAFETY OFFICERS Correspondence Address: P.O. Box 482, Fo Tan Post Office, Fo Tan, N.T., Hong Kong. 計画店会 ナビ 協会

註冊安全主任協會

Application For Admission As N	Member
Personal Particulars	
Name:() Photo
I.D. No.:() Sex: □ M	F F
Date of Birth:Nationality:	
Residential Address:	
Correspondence Address (if different from the above):	
Occupational:	
Name of Company:	
Office Address:	
Telephone: Mobile:	Email:
Registration as Registered Safety Officers approved by Labour Depart	tment
Registration No.: Date of Registration	ion:

Education (in chronological order)

School, Colleges, Universities etc	Class Completed	Date (Mth/Year)

Academic or Professional Qualifications (in chronological order)

Issuing Authority (e.g. Examination Authority, University, or Professional Institution)	Qualification Attained (Degree, Diploma or Certificate)	Date (Mth/Year)

Working Experience/Employment Record (relevant to the duties of safety officer)

Employer: Name & Address	Position	Brief Description of Duties	Date (Mth/Year)

Referees

Name	Position Held on Organization/Your relationship with referee	Membership No./Tel/Email

Declaration

I hereby declare that the above particulars are true and correct and understand any false information I have intentionally given may render to the disqualification of membership previously granted from the Society.

Signature:_____

_Date:____

- N.B. 1) Payment of admission fee HK\$500, annual subscription HK\$300 fee can be made either by cheque payable to SOCIETY OF REGISTERED SAFETY OFFICERS or by direct debit to our bank account, Hongkong Bank # 004-062-378500-001.
 - 2) This application form must be fully completed and returned to P.O. Box 482, Fo Tan Post Office, Fo Tan, N.T., together with a **COPY** of confirmation letter from Labour Department to certify the registration as a Safety Officer **AND** the cheque or pay-in-slip.

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- 個人資料收集聲明:	i
1. 你所提供的資料將用作本會處理本表格及其他與本會有關的事宜。	•
2. 你是自願向本會提供資料作上述用途。你亦明白如不提供資料或資料不足或不實,會影響本會處理本表格事宜。	
3. 你有權以書面要求香閱及更正你所提供的個人資料,有關香閱資料及要求資料事百,請你聯絡本會	•