



香港展能藝術會
Arts with the Disabled Association Hong Kong

會員申請 / 續會表格 Membership Application / Renewal Form

請於適用 內填 Please tick the appropriate boxes

	會籍類別	會費
	Membership Category	Membership Fee
<input type="checkbox"/> 新會員 New Application <input type="checkbox"/> 續會 Membership Renewal (會員編號 Membership No. : _____)	<input type="checkbox"/> 個人會員 Individual Member	<input type="checkbox"/> 一年 General Membership - Annual (HK\$100)
	<input type="checkbox"/> 團體會員 Group Member	<input type="checkbox"/> 兩年 General Membership - Biennial (HK\$200) <input type="checkbox"/> 永久 Life Membership (HK\$1,000)

個人會員適用 For Individual Member

姓名 Name : (中 Chi) _____ (英 Eng) _____ 性別 Gender : 男 M / 女 F

年齡 Age : 6-10 11-17 18-25 26-40 41 或以上 or above 身份證號碼 ID No : _____

聯絡電話 Contact No : _____ 職業 Occupation : _____

通訊地址 Address : _____

電郵地址 Email : _____ 傳真號碼 Fax : _____

身體狀況 (如適用) Type of Disability (if applicable) :

- | | |
|--|--|
| <input type="checkbox"/> 精神病康復 Ex-mental Illness | <input type="checkbox"/> 輕度智障 Intellectual Disability (Mild) |
| <input type="checkbox"/> 中度智障 Intellectual Disability (Moderate) | <input type="checkbox"/> 嚴重智障 Intellectual Disability (Severe) |
| <input type="checkbox"/> 肢體傷殘 Physical Disability | <input type="checkbox"/> 言語障礙 Speech Impairment |
| <input type="checkbox"/> 輪椅使用者 Wheelchair User | <input type="checkbox"/> 自閉症 Autism |
| <input type="checkbox"/> 視障 Visual Impairment | <input type="checkbox"/> 聽障 Hearing Impairment |
| <input type="checkbox"/> 其他(請列明) Others (Please specify) : _____ | |

團體會員適用 For Group Member

名稱 Name : (中 Chi) _____ (英 Eng) _____

聯絡電話 Contact No. : _____ 聯絡人 Contact Person : _____

通訊地址 Address : _____

電郵地址 Email : _____ 傳真號碼 Fax : _____

申請資格 Application Requirements

個人 Individual

任何年齡均可申請(如申請者未滿18歲,須由家長或監護人代為入會)。Applicants of all ages are welcome (For those under 18 years old, membership application is required to be made by parent or guardian).

團體 Group

任何商業機構、社會服務機構或非牟利社團均可申請。Business sectors, social services and non-profit organizations are welcome to apply.

會員 General Member*

全年均接受申請。會籍有效期由每年 4 月 1 日或申請日起至翌年 3 月 31 日 (1 月 1 日或以後之申請，會籍到期日則為同年的 3 月 31 日)。普通會員需繳交年費港幣一佰圓正，每年續會時需繳付會員年費。Membership application is welcome any time of the year. Applicants have to pay an annual membership fee of HK\$100. Annual membership renewal with fee is required. The membership is valid from 1 April or the date of application to 31 March of the following year (Membership due date will be 31 March of the same year for application made on or after 1 January).

永久會員 Life Member*

全年均接受申請。會籍終身有效，申請時需繳交會費港幣一仟圓正，毋須每年續期，永久享有會員福利。Membership application is welcome any time of the year. Applicants have to pay a membership fee of HK\$1,000 and enjoy member benefits permanently.

*申請以本會執行委員會接納為準。All applications are subject to the final approval of the ADA Executive Board.

會員福利 Benefits to all Members

- 1/ 會員證乙張。Receive a membership card.
- 2/ 收到本會最新資訊。Receive ADA News updates
- 3/ 參加本會活動可獲折扣優惠。Discount on ADA programmes**
- 4/ 機構會員參與本會活動，每次最多可有三名代表享有會員優惠。A maximum of 3 representatives from a Group Member can enjoy discount benefits when joining each ADA Programmes.
- 5/ 獲邀請參加會員週年大會及行使投票權。Attend our AGM with invitation and vote in the meeting.

** 折扣優惠由本會作最後決定。Discount is at the discretion of ADA

※ 本會保留修改會員年費及福利的權利，如有更改，恕不另行通知。Changes of the membership fees and benefits are subject to the discretion of ADA without prior notice.

付款方法 Payment Methods

- 劃線支票 (支票號碼: _____) 支票抬頭請寫「香港展能藝術會」。Crossed Cheque (No: _____) Payable to the "Arts with the Disabled Association Hong Kong"
- 直接存入本會匯豐銀行戶口 004-3-143999 (請連同存款收據及此表格寄回或傳真至本會)。Direct pay-in to the Arts with the Disabled Association Hong Kong (ADA) Account with the Hong Kong Bank A/C No. 004-3-143999 (Please post or fax the bank pay-in-slip together with this form to ADA.)
- 現金 Cash 請勿郵寄現金，請於辦公時間到本會繳付款項，本會辦公時間為星期一至五上午 9:30 至下午 6:30 (午膳時間下午 1:30 至 2:30 除外)。Please pay the cash in person to ADA during office hours, Mon-Fri 9:30am-6:30pm except lunch breaks 1:30pm-2:30pm. **PLEASE DO NOT MAIL CASH**

收集個人資料聲明 Personal Information Collection Statement

閣下提供的資料只供申請成為香港展能藝術會會員、日後聯絡及通訊之用，除獲本會授權的人員外，將不會提供予其他人士。All information provided will solely be used for application as member of the Arts with the Disabled Association Hong Kong, further correspondence, and promotion of activities organised by ADA. Apart from personnel duly authorised by ADA, nobody will be given access to your personal particulars.

18 歲以下人士適用

如申請者未滿 18 歲，須由家長或監護人簽署及代為填寫此表格。

For applicants under 18 years old, endorsement and membership subscription by parent or guardian required.

家長／監護人簽署 Signature by the Parent/Guardian : _____

家長／監護人姓名 Name of the Parent/Guardian : _____

與申請者之關係 Relationship : _____ 電話 Tel : _____

申請人或機構代表簽署 Signature of
authorized representative or
applicant : _____

申請人或機構代表姓名 Name of
authorized representative or
applicant : _____

日期
Date : _____

(團體會員適用 For Group member only)
機構蓋章 Organization Chop

地址：香港銅鑼灣福蔭道 7 號銅鑼灣社區中心 4 樓

Address : 4/F, Causeway Bay Community Centre, 7 Fook Yum Road, Causeway Bay, H.K.

電話 Telephone : 2855 9548 傳真 Fax : 2872 5246

電郵 Email : ada@adahk.org.hk 網頁 Website : www.adahk.org.hk