



FOR OFFICE USE ONLY	
Application Ref:	
Membership No:	
Approved By:	
Processed By:	

HONG KONG ACM SIGGRAPH PROFESSIONAL CHAPTER

c/o Department of Multimedia and Internet Technology,
 Hong Kong Institute of Vocational Education (Lee Wai Lee), Room LW896, 3 King Ling Road, Tseung Kwan O, NT.
 Fax: (852) 3928-2601 Email: hkchapter@siggraph.org.hk URL: <http://www.siggraph.org.hk>

Membership Application Form

Please tick the appropriate category:

<input type="checkbox"/>	Corporate membership (annual fee: HK\$1000)
<input type="checkbox"/>	Individual membership (annual fee: HK\$150)
<input type="checkbox"/>	Student membership (annual fee: HK\$50)

Applicant's information – for individual and student membership (in BLOCK letters)

Name: (Dr/Mr/Miss/Mrs/Ms)	
(First Name)	(Surname)
(Chinese Name, if applicable)	Nationality:
Gender: Male / Female	Date of Birth: (dd/mm/yyyy)
Name of Company / Institution:	
Position (If applicable):	Contact Number:
Fax Number:	Mobile Number:
Mailing Address:	
Email Address:	Web Site:

Applicant's information – for corporate membership (in BLOCK letters)

Name of Company / Institution:	
(English)	
(Chinese, if applicable)	
Contact person and position:	Contact Number:
Fax Number:	Mobile Number:
Mailing Address:	
Email Address:	Web Site:

Additional Information - for all membership applicants

Please tick what industry are you from (if applicable):

<input type="checkbox"/>	Game Developing	<input type="checkbox"/>	Game Design and Game Art
<input type="checkbox"/>	Animation Production	<input type="checkbox"/>	Video and Video Post - Production
<input type="checkbox"/>	Advertising	<input type="checkbox"/>	Web or Graphic Production
<input type="checkbox"/>	Education	<input type="checkbox"/>	Students
<input type="checkbox"/>	Others: _____		

Would you like to receive our promotion material for the upcoming events? Please tick.

<input type="checkbox"/>	Yes, by email please	<input type="checkbox"/>	No, thanks
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Please tick the method of Payment:

<input type="checkbox"/>	Cheque Payment for the amount of HK\$_____, made out to " HONG KONG ACM SIGGRAPH PROFESSIONAL CHAPTER LTD", enclosed with this form and mail to: <p style="text-align: right;">HONG KONG ACM SIGGRAPH PROFESSIONAL CHAPTER c/o Department of Multimedia and Internet Technology Hong Kong Institute of Vocational Education (Lee Wai Lee), Room LW896, 3 King Ling Road, Tseung Kwan O, NT.</p>
<input type="checkbox"/>	Directly deposit the membership fee directly into the following account: The Bank of East Asia Account no: 015-132-40-07485-6 Account name: HONG KONG ACM SIGGRAPH PROFESSIONAL CHAPTER LTD. and fax / post back the receipt with this form.

Declaration

1. I admitted to the Chapter, I undertake to be bound by the Constitution of the Chapter, as amended from time to time.
2. I understand that the Membership Committee of the Chapter reserves the right to approve or reject the membership application of any individual.
3. I understand that my personal data is collected for the Chapter's administration and correspondence purpose only. Those data might be used to inform me on events organized by the Chapter and other organizations.

Signature: _____ Date: _____

Personal Data (Privacy) Notice - Use of Personal Data

People who supply data in their application to the Hong Kong ACM SIGGRAPH Professional Chapter are advised to note the following points, pursuant to the Personal Data (Privacy) Ordinance:

1. Personal data provided in this application form will, during the entire process, be used solely for this purpose, and in this connection, the data will be handled by the Chapter's staff or by any Council members of the Chapter who is directly involved in the administration of this application.
2. Applicants are advised to provide all the information requested in the relevant documents, where applicable, failing which the Chapter may be unable to process and consider their applications.
3. After the applications have been processed and the relevant exercise completed:
 - (a) The information collected from unsuccessful applicants will be destroyed;
 - (b) The application papers of successful applicants will become part of the file which the Chapter opens for each member.
4. Under the provisions of the Personal Data (Privacy) Ordinance, applicants have rights to request access to, and to request the correction of, their personal data. Applicants wishing to access or make corrections to their data should submit written requests to the Membership Chair of the Hong Kong ACM SIGGRAPH Professional Chapter.

Declaration

1. I have noted the general points pursuant to the Personal Data (Privacy) Ordinance.
2. I authorize the Hong Kong ACM SIGGRAPH Professional Chapter or any other office that is directly involved in the administration of this application to use, check and process my data as required for my application.
3. I understand that upon successful application, my data will become a part of my member record and may be used for all purposes as prescribed under relevant rules and regulations, so long as I remain member of this Chapter.
4. I declare that the information given in support of this application is accurate and complete. I understand that any misrepresentation will disqualify my application.

Signature: _____ Date: _____