**Application for Membership**

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| **Please tick as appropriate:****❑ Full Member ❑ Associate Member ❑ Company / Individual Member****❑ Upgrade Membership** |
| **Name of Company: (for Company Member only) \*Please appoint a contact person** |
| **Surname:** |  | **Given Name:** |  |
| **中文姓名:**  |  | **HKID No / BR No.:** |  | **Sex:** |  |
| **Correspondence Address (in English):** | **Recent****Photograph** |
| **Mobile No.:** |  | **E-mail:** |  |
| **For upgrade membership, please enclose photocopy of all supporting document.** |

I/We hereby apply to become a Member of the Society of Accredited Safety Auditor Limited and agree to abide to the Articles and Memorandum, Rules and Regulations of the Society if accepted. I/We certify that the information I/we have given are true and correct.

**Please tick the appropriate box**

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|  | I AGREE to the use of my contact number / email address to receive any further news on The Society of Accredited Safety Auditors Limited.  |
|  | I AGREE to receive any further news on products and services of The Society of Accredited Safety Auditors Limited business partners.  |
|  | I have read and agreed to the Personal Information Collection Statement and Privacy Policy Statement (2021PICS01) of The Society of Accredited Safety Auditors Limited.  |

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| Signature: |  |
| Date: |  |

Please enclose all copies of relevant document and an entrance fee HK$100 and annual subscription of Company Member is HK$1,500 Full Member is $400 and Associate Member is $250 payable to the “The Society of Accredited Safety Auditors Limited”.

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| **For official use only** |
| Grade Approved: Full Member / Associate Member / Company Member Approval given

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| Date |  | Name:Secretary / EC Member |  | Name:President / Vice President |

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**The Society is incorporated with limited liability**