

HKWMA Membership Application Form for 2022/2023 Session

Organization or Institution Membership

Classes of Membership

Membership is open to all those interested in or working in the waste management industry. There are four classes of membership available:

- Individual Membership. For individuals aged 18 years or above at the time of application.
- Organization Membership. For companies, partnerships, government bureaux/departments, trade associations, etc. Each organization can designate five representatives (#1 to #5).
- Institution Membership. For non-profit making bodies such as tertiary educational institutions, green three representatives (#1 to #3).

groups and charities. Each institution can designate Student Membership. For full-time students in tertiary education. Membership Subscriptions (*) Firstly, please select ($\sqrt{}$) the class of Membership: ☐ Organization Membership HK\$3,000 per year ☐ Institution Membership HK\$1,200 per year ☐ Individual Membership HK\$ 400 per year ☐ Student Membership Free Secondly, please complete the relevant application/renewal form and attach a crossed-cheque for the appropriate amount made payable to "Hong Kong Waste Management Association" or attach a copy of the bank-in slip (ATM or bank transfer) into Hang Seng Bank (Account no. 225-110162-001) in the name of the Association. Send to P.O. Box No. 28705, Gloucester Road Post Office, Hong Kong. Membership is valid upon receipt payment. The membership year runs from 1st July to 30th June, however, **NEW members** shall be entitled to a reduced membership fee if they join part-way through the membership year – please select ($\sqrt{}$) if applicable: \Box 1st October to 31st December 75% of annual fee ☐ 1st January to 31st March 50% of annual fee

☐ 1st April to 30th June 25% of annual fee *Communication from HKWMA will be mainly by email*

NAME OF ORGANIZATION OR INSTITUTION	
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	SURNAME, GIVEN NAME(S)
AREA OF ACTIVITY IN WASTE MANAGEMENT	NAME OF EMPLOYER OR EDUCATIONAL INSTITUTION
CORRESPONDENCE ADDRESS	PRESENT JOB TITLE OR COURSE NAME
	EMAIL ADDRESS CONTACT PHONE NO.
	CORRESPONDENCE ADDRESS
#1) SURNAME, GIVEN NAME(S)	
EMAIL ADDRESS CONTACT PHONE NO.	
#2) SURNAME, GIVEN NAME(S)	BRIEF SUMMARY OF PROFESSIONAL OR ACADEMIC EXPERIENCE
EMAIL ADDRESS CONTACT PHONE NO.	
#3) SURNAME, GIVEN NAME(S)	
EMAIL ADDRESS CONTACT PHONE NO.	
#4) SURNAME, GIVEN NAME(S)	AREA OF INTEREST IN WASTE MANAGEMENT
EMAIL ADDRESS CONTACT PHONE NO.	
#5) SURNAME, GIVEN NAME(S)	
EMAIL ADDRESS CONTACT PHONE NO.	
On behalf of my organization/institution, I hereby apply membership of HKWMA and all designated representat agree to abide by its regulations.	or I hereby apply for individual/student membership of HKWMA and agree to abide by its regulations.
SIGNATURE DATE	SIGNATURE DATE

Individual or Student Membership