



香港電影後期專業人員協會有限公司

ASSOCIATION OF MOTION PICTURE POST PRODUCTION PROFESSIONALS (HK) LIMITED

Invited Membership Application Form 邀請會員申請表格

邀請會員編號 (For Official Use Only)

Invited Membership No.: _____

中文姓名

Name in Chinese: _____

英文姓名

Name in English: _____

近照
Recent Photo

性別

出生日期 (日/月/年)

Sex: _____

Date of Birth (dd/mm/yy): ____/____/____

香港身份證號碼

HKID No.: _____

聯絡電話

Contact No.: _____

電郵地址

E-mail Address: _____

任職公司

Company Name: _____

業務性質

Nature of business: _____

職位

Title / Post: _____

從業時間

How long in the industry: ____ Year ____ Month

郵寄地址

Postal Address: _____

本人願意加入 (香港電影後期專業人員協會有限公司) 成為會員，並遵守一切會規。

I would like to be a member of the "Association of Motion Picture Post Production Professionals (HK) Limited" (AMP4) and obey its rules and regulations in accordance with the Memorandum and Articles of Association of AMP4.

簽署

Signature: _____

日期

Date: _____

介紹人姓名 (如有)

Sponsor's Name (If any): _____

介紹人簽署

Sponsor's Signature: _____

所有資料全部保密

ALL INFORMATION WILL BE KEPT IN STRICT CONFIDENCE

請勿填寫本欄

For Official Use Only

會員類別

Membership Status: _____

審核人員

Approved By: _____

審核日期

Approved Date: _____

備註

Remarks: _____

請將此表格電郵至info@amp4.com.hk或郵寄至(香港尖沙咀漆咸道南45-51號·其士大廈8樓802室 香港電影後期專業人員協會收)

Please return this form to AMP4 by email (info@amp4.com.hk) or

by mail (Room 802, 8/F, Chevalier House, 45-51, Chatham Road South, TST, HK Attn: AMP4)