



**Belilios Old Girls' Association Limited**

庇理羅士舊生會有限公司

**Membership Application Form**

**Membership Fee: HK\$500 (one-off payment)**

Payment by:  Cash  Cheque (No. \_\_\_\_\_/\_\_\_\_\_ Bank)  
*Cheque should be made payable to "Belilios Old Girls' Association Ltd"*

Full Name :  
(English)

(Chinese)

\_\_\_\_\_

Year of Graduation (S5): \_\_\_\_ or (S6): \_\_\_\_ Occupation : \_\_\_\_\_

Correspondence address:

\_\_\_\_\_

Contact nos.: Mobile Phone

Residential Tel.

\_\_\_\_\_

E-mail address : (In case of any change thereafter, please inform us at bogawm@bogahk.org)

\_\_\_\_\_

I have read the personal data statement (below) and \*agree/disagree to the use of my personal data for the said purposes.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Statement on the use of Personal Data :**

*BOGA intends to use your personal data including your name, year of graduation, e-mail address, correspondence address, telephone number and other contact details ("Personal Data") to send you information relating to Belilios Old Girls' Association Limited ("BOGA"), Belilios Public School ("BPS") and Belilios Old Girls Foundation ("BOGF") or other organizations relevant to BPS including e.g. newsletters, reports, invitations to events organized by BOGA, BPS and BOGF etc. ("Purposes"). Please give us your written consent by checking the box above the Signature (which includes an indication of no objection) for these Purposes. You may in future withdraw your consent to the use and provision of your personal data for direct marketing. In case you wish to withdraw your consent, please email to bogawm@bogahk.org or by post to BOGA Ltd via BPS 51 Tin Hau Temple Road, North Point, Hong Kong to indicate so. BOGA shall, without charge to you, ensure that you are not included in future direct marketing activities.*

**Optional**

Please complete the following information which is intended for internal use only (e.g. to facilitate contact and draw expertise for special projects). This information will not be disclosed without your prior consent.

1. Residential address (if different from above) : \_\_\_\_\_

2. Employment/Business details:

Name of Employer/Business \_\_\_\_\_

Nature of Business \_\_\_\_\_ Position held \_\_\_\_\_

3. Area of expertise :
- information system
  - mass media
  - China-related issues
  - others, please specify \_\_\_\_\_
  - legal
  - medical
  - education
  - accounting
  - financial
  - designing

Please return this form and the cheque to Belilios Old Girls' Association Ltd, via BPS 51 Tin Hau Temple Road, North Point, Hong Kong. Thank you.

Website: [www.bogahk.org](http://www.bogahk.org) E-mail: bogawm@bogahk.org  
2019/10

Membership No. \_\_\_\_\_  
issued on \_\_\_\_\_ by \_\_\_\_\_