

Part 1 : Personal Information 個人資料 (Please fill the form in English 請以英文填寫)

<input type="checkbox"/> New Application 新會員		<input type="checkbox"/> Renewal 續會		Membership No. 會員編號: _____
Name 姓名(English 英文) (Chinese 中文)	Prof./Dr./Mr. /Ms./Mrs. (Please circle where appropriate)			
	(Surname)	(First Name)		
	(姓)	(名)	教授/博士/先生/小姐/太太 (請圈出適當的選擇)	
Mailing Address 通訊地址				
Name of Organization 工作機構				
Position/ Title 職稱				
Telephone Number 電話	(Off. 辦公室)	(Mob.手提電話)	(Hm.住所)	
Email Address 電郵地址				
Fax 傳真號碼				

Part 2 : Education 教育 (Please attach copy of certificate 請附證書副本)

Qualification 學歷	Major 主修	Institute 學院	Date Awarded 獲取日期

Part 3 : Working Experience 工作經驗

Organization 機構	Country/Region 國家/地區	Position 職位	Nature 性質	Date 日期	
				From 由	To 至

Total number of years in professional counselling work 從事輔導工作之總年數: _____ Years 年

Part 4 : Membership Categories 會員類別 (Please ✓ the appropriate box 請在□內加上✓號)

Full Member 全會員(一年會籍) HK\$250

Full Member 全會員(三年會籍) HK\$675(九折優惠價)

With Degree, Diploma or Certificate major in counselling, psychology or equivalent. (With voting right)
持有與心理輔導、心理學相關之學位、文憑或證書 (擁有投票權)

Associate Member 附屬會員 HK\$150

Undergoing counselling or psychology training and with interest in counselling and psychology (Without voting right)

正接受心理輔導或心理學訓練和對心理輔導有興趣者 (沒有投票權)

The membership is valid from 1 January to 31 December of that year.

會籍有效期為每年 1 月 1 日至 12 月 31 日。

Signature 簽署: _____ Date of Application 申請日期: _____

OFFICE USE ONLY						
Bank: _____	CQ: _____	Amt: _____	Bank-in Date: _____	Rcpt: _____	Staff: _____	Remarks: _____



Asian Professional Counselling and Psychology Association

亞洲專業輔導及心理協會

Membership Application Form 會員申請表格

Part 5 : Payment Method 付款方法

Please make cheque payable to 'Asian Professional Counselling and Psychology Association Limited' or bank in (HSBC#808-021620-292) and mail to:

**Membership Department,
Asian Professional Counselling and Psychology Association,
Department of Counselling and Psychology,
Hong Kong Shue Yan University,
10 Wai Tsui Crescent, Braemar Hill Road, North Point, Hong Kong**

For further information, please visit our website: <http://www.apca-counselling.com>
Enquiry: **+852 28067326 (Voicemail)**

OFFICE USE ONLY

Bank: _____ CQ: _____ Amt: _____ Bank-in Date: _____ Rcpt: _____ Staff : _____ Remarks: _____