香港助產士會

香港灣仔高士打道
223 號
海聯大廈 13 樓 D1

Hong Kong Midwives Association

D1, 13/F, Hyde Centre,
223, Gloucester Road,
Wanchai, Hong Kong

Tel : 28938800 Fax: 25725329

Email: midwives@netvigator.com

課程申請表
COURSE APPLICATION FORM

課程名稱/編號
Course Name/Code No.:

英文姓名 (請以正楷填寫) Name in English (In block letters)	**中文姓名 Name in Chinese**
地址 Address	
聯絡電話號碼 Contact tel. no. 住宅 Home : 工作 Work : 手提 Mobile :.	
電郵 E-mail	**傳真 Fax no.**
工作機構 Employing organization	**職位及所屬部門 Present post & Department**
是否會員 Membership □ 是 Yes □ 否 No	**會員編號 Membership no.**
只供本會填寫 For official use only	
Date received	This application is □ accepted □ not accepted
Fee	Cheque no. (Bank)
Approved by Name in block : Signature : Date :	
Remarks	

報名細則 Points to note :

1. 填妥表格後, 請連同 :
   - 已貼上郵票之回郵信封一個; 寄返本會, 以作日後寄回通知信及收據/退款之用。
   - 學費(請用劃線支票註明收款人爲「**香港助產士會**」)
2. 報名後, 無論接納與否, 均有通知信; 報名一經接納, 已繳之學費恕不退回。
3. 凡上課超過 80%及符合課程要求, 將獲發出席/課程証書。
4. 出席/課程証 書將會根據表格上的 中/英文姓名印發。

1. Please send the completed application form together with :
   - a stamped self-addressed envelop
   - registration fee (crossed cheque payable to "***Hong Kong Midwives Association***")
2. The applicants, whether accepted or not, will be informed. Once accepted, all registration fees are non-refundable.
3. Those who have attended 80% or more of the course/fulfilled the course requirement will be awarded an attendance/course certificate.
4. Please ***PRINT*** your name as it should appear on the attendance certificate.