



澳洲增城同鄉會聯福堂

LUEN FOOK TONG INCORPORATED

Tel: + 61 2 9281 4993; Email: LFT1916AUS@GMAIL.COM

Address: 2nd Floor, 52 Dixon Street, Sydney NSW 2000, Australia

Membership Application Form 会员申请表

Applicant 申请人		
Surname 姓	Given Name (as shown in your passport or driver license) 名	
Preferred English Name: 常用英文名	Chinese Name 中文姓名	
Address 地址		
Telephone 电话	Email address 电邮	
Native Village 籍贯	Wechat account 微信	
Date of Birth 出生日期	Occupation 职业	Place of Birth 出生地
I hereby apply to become a member of LuenFook Tong Incorporated. In the event of my admission as a member, I agree to bound by the rules of the association for the time being in force. 本人申请成为联福堂的会员，并愿意遵守会规。		
_____		_____
Signature 签名		Date 日期

Nomination (2 nominees required)两位提命人			
As a member of LuenFook Tong Incorporated, I nominate the applicant, who is personally known to me, for membership of LuenFook Tong Incorporated. 本人是本会会员并认识申请人，愿意提命申请人成为会员。	Name 姓名	Signature 签名	Date 日期

Committee Approval 委员会审核批准			
The committee of LuenFook Tong Incorporated approves the applicant to be a member of LuenFook Tong Incorporated. 联福堂委员会审核并批准该申请人成为本会会员。	Name 姓名	Signature 签名	Date 日期



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Office Use Only: 会籍管理

Membership No:

会员号

Membership card No:

会员卡号