



# Hong Kong Society of Medical Genetics Co. Ltd.

c/o Clinical Genetic Service, Cheung Sha Wan Jockey Club Clinic  
2 Kwong Lee Road, 2/F, Sham Shui Po, Kowloon, Hong Kong  
Telephone: 2729 4686 Fax: 2729 1440  
Email: hksmg.com@gmail.com

## Membership Renewal Form for 2015/2016

*(For membership renewal only, new members please use Membership Application Form)*

\*Name: \*English \_\_\_\_\_ \*Chinese \_\_\_\_\_

\*Membership Category: \_\_\_\_\_

\*Email address: \_\_\_\_\_ *(\*must be completed for communication)*

Membership Category	Subscription Fees	Amount Paid (HK\$)
Ordinary	\$200	
Associate	\$150	
Associate (Overseas)	\$100	

Please make cheque payable to the **"Hong Kong Society of Medical Genetics"**

Cheque No: \_\_\_\_\_ Bank: \_\_\_\_\_  
*check box if receipt required*

Please submit the completed form and cheque to:

Hong Kong Society of Medical Genetics  
c/o Mr Tony Tong, Hon Treasurer  
Clinical Genetic Service, Cheung Sha Wan Jockey Club Clinic  
2/F, 2 Kwong Lee Road, Sham Shui Po, Kowloon

### PERSONAL DATA UPDATE

Title: \_\_\_\_\_ Post: \_\_\_\_\_

Institution: \_\_\_\_\_

Corresponding Address: \_\_\_\_\_

Contact No.: Office \_\_\_\_\_ Mobile/Home \_\_\_\_\_

Other information (if any): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_