

(For FULL-TIME students only)

English Full Name: _____ **Other Name:** _____
(Surname) (Given Name)

Chinese Name: _____ **Gender:** M / F * **Student ID:** _____

Study Year: Foundation / 1 / 2 / 3 / 4 / 5 * **Expected Year of Graduation:** _____

Institution: *

CITA / CityU / CUHK / HKAPA / HKBU / HKDI / EdUHK / HKPU /
HKSJU / HKU / HKUST / IVE(LWL) / IVE(CW) / IVE(HW) / IVE(KC) /
IVE(KT) / IVE(MH) / IVE(ST) / IVE(TM) / IVE(TY) / LU / OUHK /
TWC / HSMC / THEi / HTICCIICI / Other: _____

Educational Background: *

(Non-Degree / Degree / Post-Graduate / Other: _____)
& (Local / Non-Local Student)

* Please circle as appropriate

Study Major:

- | | | |
|---|--|--|
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Banking, Finance and Accounting | <input type="checkbox"/> Business Administration |
| <input type="checkbox"/> Education | <input type="checkbox"/> Engineering & Surveying | <input type="checkbox"/> Fine Arts, Music, Design
& Performing Arts |
| <input type="checkbox"/> Information Technology | <input type="checkbox"/> Journalism | <input type="checkbox"/> Medicine, Dental, Nursing
& Pharmacy |
| <input type="checkbox"/> Law | <input type="checkbox"/> Liberal Arts | |
| <input type="checkbox"/> Science | <input type="checkbox"/> Social Science | |
| <input type="checkbox"/> Others | | |

Email 1: _____ **Email 2:** _____

Mobile: _____ **Facebook (optional):** _____

Membership Categories:

- 1 Year (HK\$40) 2 Years (HK\$70) 3 Years (HK\$100) 4 Years (HK\$120)

Wofoo Leaders' Network Secretariat

Tel: 3651 5333 **Fax:** 2368 3171 **Email:** enquiry@wln.hk

Website: www.wse.hk (Wofoo Social Enterprises) www.wln.hk (Wofoo Leaders' Network)

Facebook Page: www.facebook.com/WofooLeadersNetwork

(Rev 13.08.2015)

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Application for membership:

- I apply for membership of Wofoo Leaders' Network (WLN) and agree to abide by the Constitution and all applicable rules implemented and to be implemented from time to time. I understand that WLN reserves its discretion to accept my application or not, and that the initial membership fee is non-refundable once my application is approved.*
- I agree to be a member of Wofoo Infinity Network (WIN) after graduation.*
*WIN is a WLN alumni association.

Signature: _____ **Date:** _____

Use of personal data:

1. WLN intends to use your personal data provided in this application form for offering and promoting the services and facilities of WLN and Wofoo Social Enterprises (WSE) and soliciting contributions for recreational, charitable, philanthropic or similar purposes.
2. We are committed to handle your personal data with due care. Under the law, we cannot use your personal data without your consent. If you consent to such use, please indicate below. Your agreement or objection to the use of your personal data will not affect your application for membership.
3. After you have become a WLN member, you have the right of access to all your personal data held by WLN. You also have the right to change your mind and restrict the use of your personal data in any manner. Such change will not affect your membership whatsoever. Please email to WLN Secretariat (secretariat@wln.hk) with your name, membership number and Chapter affiliation if you wish to change your consent to the use of personal data at any time.

I consent to the use of the personal data including my name, my student ID, name of my institution, my study major, my email, mobile number and my Facebook for the purposes mentioned in paragraph 1 above:

Signature: _____ **Date:** _____

(For internal use only)

Membership No.: _____ **Receipt No.:** _____

Membership Effective Date: _____ **Membership Expiry Date:** _____

Chop and Signature: _____

Wofoo Leaders' Network Secretariat

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