

Notification of Change 會員更改通知書

如需更改個人資料，請填妥下列表格寄回本會或傳真 25701525。

Please mail this notification form to the LUA Office or fax to 25701525 for updating your personal record.

Personal Particulars 個人資料 (Please fill it in English 請以英文填寫)

* Mandatory Fields 必須填寫欄目

Name in English (英文全名)*: _____ Name in Chinese (中文全名)*: _____

HKID No. (身分證號碼)*: _____ Membership No. (會員號碼): _____

E-Mail (電郵地址): _____ Mobile (手提電話): _____

Home Address (住址) Choose as corresponding Address (選擇為通訊地址):

Home Tel. (住址電話):

Company Name (公司名稱): _____

Company Address (公司地址) Set as corresponding Address 設定為通訊地址:

Company Tel. (公司電話): _____ Fax (傳真號碼): _____

Title (職位): _____ Agent Code (編號): _____

Others (其他):

Declaration 聲明

I declare that all information given in the form above is accurate and complete. I understand that the information provided will become my record and may be used for all purposes relating to record keeping and all activities related to LUAHK.

本人聲明申請表中所提供的一切資料均正確無誤。本人明白及同意「保協」將所提供的資料作為會員記錄和「保協」活動推廣等用途。

Member Signature (會員簽署): _____

Date (日期): _____