

University Parents Community 科大家長協會



Membership Application Form

Adult (1)

Name: _____
(Family) (Given)

Dept.: _____ Email: _____
Office Tel.: _____ Mobile: _____

Adult (2)

Name: _____
(Family) (Given)

Dept.: _____ Email: _____
Office Tel.: _____ Mobile: _____

Home Tel: _____ Address: _____

Children

(1) _____
(2) _____
(3) _____

Family Name Given Name Birth Date (d/m/y)

Family Contact Person: _____

UPC Membership No.: _____ (if renewing)

- Make out a cheque payable to "University Parents Community"

Annual Family Membership Sept. 1, 2023 to Aug 31, 2024: (Please choose)

- \$120 - Before September 30th (Early Bird Rate)
- \$180 - Regular Rate
- \$90 - After March 31st (late arrivals)

- Send by campus mail or deliver the cheque and Membership Application Form to:

University Parents Community (UPC), Tower 18, G/F, SSQ, HKUST

I request that this application for University Parents Community (UPC) Membership be accepted, and in so doing I agree to abide by the policies of the UPC and I will not hold the UPC, its officers or employees liable for any loss, injury, or damage to myself, my family members, or my property as a result of participation in UPC activities.

Signature Date

For Office Use Only
Date Received:

Date Processed:

Amount Paid:

Mem. No:

Exp:

Rcpt. No.