

香港藥學會

The Pharmaceutical Society of Hong Kong

Room 1303, Rightful Centre, 12 Tak Hing Street, Jordan, Hong Kong

Tel: (852) 2376 3090 | Fax: (852) 2376 3091

E-mail: pharmacist@pshk.hk

Website: http://pshk.hk

## Membership Application Form

### Membership Status

Voting       Pre-registration       Associate       Student

Photograph

### Personal Information

Information provided should be the SAME as that printed on the HKID card.

All information will be kept strictly confidential and be used for application and activities of the Society only.

Name: \_\_\_\_\_ Chinese Name: \_\_\_\_\_ Sex: \_\_\_\_\_  
*Last name/ Surname first*

HKID No.: \_\_\_\_\_ HK Registration No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Tel: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ (Mobile/Pager) \_\_\_\_\_

Fax: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ E-mail: \_\_\_\_\_

### Academic and Professional Qualifications

	<u>Institution</u>	<u>Qualification</u>	<u>Year obtained</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

### Current Practice Setting - Please check where appropriate:

Academic       Hospital Authority       Local Manufacturer       International Manufacturer       Others: \_\_\_\_\_  
 Community       Private Hospital       Trading/Wholesale       Government/Civil Service      \_\_\_\_\_

### PCCC Membership - Please indicate if you are interested in (check where appropriate):

Receiving the Pharmacy Central Continuing Education Committee (PCCC) C.E. article by email. (Free of charge)

### The Pharmaceutical Society Charitable Foundation Limited Membership (Free of charge)

Members of PSHK will automatically become members of the Pharmaceutical Society Charitable Foundation Limited, which is a charitable company. Please indicate if you do not wish to be the member of the Foundation. [Note 5]

I do not wish to join as a member of the Pharmaceutical Society Charitable Foundation Limited.

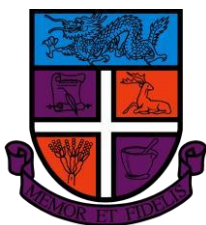
I declare that all information provided in this application and in documents submitted is true and correct.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Cheque enclosed(No):** \_\_\_\_\_ **Bank:** \_\_\_\_\_

**Direct deposit (HSBC 0022-163-166): Please attach bank-in receipt**

**Cash**



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**Notes:**

1. Payment: by cash, crossed cheques (made payable to **The Pharmaceutical Society of Hong Kong**), or by direct deposit into **account HSBC 0022-163-166**.

2. Fees:

Entrance Fee: **HKD200.00 Plus Membership Fees** (Shown as below):

	Join between 1 <sup>st</sup> Jan and 30 <sup>th</sup> June	Join between 1 <sup>st</sup> July and 31 <sup>st</sup> Dec
Students *	\$100	\$50
Voting members #	\$400	\$200
Pre-registration	\$200	\$100
Associate members #	\$600	\$300

- The above scheme applies to new members upon their application only.
- All membership status expires on 31st December every year.
- Renewal fee must be paid in full and no half-year renewal payment will be accepted.
- \* Entrance fee will be waived.
- # For voting members and associate members, renewal of membership for three years will enjoy a \$200 discount.
- All fee submitted related to unsuccessful application will not be refundable.

3. New member processing time is about 6 to 8 weeks.

4. Membership detail synchronizes with PCCC membership database regularly.

Please note that only processed membership detail will be sent to PCCC.

5. The Pharmaceutical Society Charitable Foundation Limited is a charitable company formed by PSHK. The Foundation aims to promote public health and to advance drug knowledge of people who are engaged in patient care and to implement programs on a non-profit making basis for specific patient groups, elderly people, healthcare workers in old aged homes and the general public.

6. Pre-registration members are required to inform us, with copies of their licence, after they become Hong Kong registered pharmacists.

Please check the following before sending out your application form

- One recent passport size photograph of the applicant
- Copies of certificates of academic and professional qualifications
- Voting members only*: A copy of the Certificate of Registration with the Pharmacy and Poisons Board of Hong Kong
- Application fee/ crossed cheque made payable to "The Pharmaceutical Society of Hong Kong"/ bank-in receipt
- Pre-registration members (overseas graduates) only*: Notification Letter issued by the Pharmacy and Poisons Board of Hong Kong indicating that you are eligible for the registration examination OR other evidence to support that you are undertaking pharmacy internship e.g. letter from former preceptor.

**For Official Use Only**

Secretary: Application form received on (date): \_\_\_\_\_ (Sign): \_\_\_\_\_

Approval: The application was **approved** / **not approved** by the General Council at the General Council Meeting

on: \_\_\_\_\_ (date)

(Sign) \_\_\_\_\_ (Name) \_\_\_\_\_ (Chairman or Officer on behalf)

Treasurer: Cheque no: \_\_\_\_\_ Received by: (sign) \_\_\_\_\_

Direct deposit (HSBC 0022-163-166): Bank-in receipt attached

Membership coordinator: Membership card issued and sent on (date): \_\_\_\_\_ (Sign) \_\_\_\_\_

Membership coordinator: Membership No: \_\_\_\_\_