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## **Membership Application / Donation Form**

## 入會申請/捐款表格

this form is collected for the purpose of membership correspondence

and donation. It will be kept in confidential.

會員編號:	
收據編號:	
☐ Membership application	入會申請
Donation	捐 款

只用於會員通訊及捐款事宜,並予以保密處理。

With the donation and support from different walks of life in the society, HEDA is set up to provide specialized services to people with eating disorders and their caregivers. If you wish to be our donors and/or members, please fill in this form and enclose a crossed cheque made payable to "Hong Kong Eating Disorders Association Limited". Thank you.

全賴各界熱心人士的支持,香港進食失調康復會得以成立,專為進食失調症的病者及其家人提供服務。如閣下樂於成為本會會員或捐助

7,請填妥下列表格 			於抬頭寫「香港類	<b> ( ( ( ( ( ( ( ( ( </b>			* N/A/4	<b>:</b> □		
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* Sex 性別:	Male 男 /	Female 女	Age 年 齡:		Occupation 職 業	<b>美</b> :				
* Contact No.: 聯絡電話:										
* E-mail 電 郵:										
*	Flat (室): Floor (樓): Block/Bldg (座/大廈):									
Correspondence	Estate/Court (屋苑): Street (街):									
Address	District(區):									
通訊地址	Area (地區)	): Hong I	Kong [] K	owloon [	New Territories	O	verseas			
			 港 九	龍	新界	— ¾	<b></b>			
* Status 身份:	Patients/	Ex-patients 新舊			ers 家屬或照顧者		husiasts 熱心人	 		
(若有意定期 (If you are wi	接收以下資	r	」以 ✓ 表示,		汉方法。) icate as ✔ in the re	elated ar	ea.)			
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