

Hong Kong Blockchain Society

Membership Application (Professional)

		Ар	pilicant	Information			
Full Name:			M/F Mr/	/ Ms/ Mrs/Dr	Email		
Last		First	Dhana	LUZ	UD/December N	l-	
Home Phone:		IVIODIIE I	Pnone	НК	ID/ Passport N		
Business Sector (c	nly circle 1)						
Manufacturing	Import/Export	Wholesale	e / Retail	Transport / Logistics	s Hospitality	Food	d and Beverages
Finance / Banking	Insurance	Banking		Real estate	Business Serv	vices Pers	onal Service
Electronic	Education	Constructi	ion	Utilities	Conglomerate	Com	munication
Telecom/ IT	Others:						
Address:							
Mailing							
Address							
(If Different)							
		Emr	alovmor	nt Information			
Job Title:		•			are in Compan	W.	
Job Tille.	Years in Company:						
Company:							
Name of Institution	n/ Qualificat			ssional Qualification (e.g. Computer S		Country	Date
Professional Body		helor of Scienc		ance)	cience,	Country:	Awarded
		of Law, Charter	red				(MM:YYYY)
	Finance A	riaiysi)					

Disclaimer and Signature

I certify that the information I provided are true and complete to the best of my knowledge.

If this application leads to acceptance, I understand that false or misleading information in my application may result in the revoke of my membership status.

Signature:			Date:		
Membership Inquiry:	Membership@hkbcs.org	Website	https://www.hkbcs.org/index.html		
General Inquiries	info@hkbcs.org	Address	Hong Kong Blockchain Society, 9/F, E Trade Plaza, 24 Lee Chung Street, Chai Wan, Hong Kong		