香港放射學技師會

The Hong Kong Radiological Technologists' Association (Member of ISRRT)

MEMBERSHIP PERSONAL DATA RENEWAL FORM

Please complete the form in **BLOCK LETTERS**, $\sqrt{}$ the appropriate boxes, and return together with the required documents to The HKRTA, P. O. Box 73549, Kowloon Central Post Office, Kowloon.

Membership No.:	TATT	T-
Name:	_ Date of Birt	th (dd-mm-yyyy):
Marital Status: ☐ Single ☐ Married		TVO
Home Phone:	Pager:	
Home Fax:	Mobile:	
E-Mail Address:		
Home Address:		B Me A
S - Silver S	VYV	Marie O.
Company Name:	1 100	Position:
Office Phone:	Office Fax:	Lane P
Office Address:	po	
Q 300 00 1		
Mailing Preference: Home E-mail	9	
Professional Qualification:	38666	Voor Oktoined Bound Du
Professional Qualification.	7 6/	Year Obtained: Issued By:
F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Jane 1	F. 67 3
CN (87 CX	1000	15-40/ O
Radiographer Registration in Year	_, registered as	□Part I □Part II □Part III □Part IV
Declaration: I declare that all my completed personal details are correct and true.		
r decide that all my completed personal dete		id true.
Member's Signature	别学	Data
Member's Signature:		Date:
Diagram of the second s	diaabla.	
Please mail your form with the followings if app 1. One recent photo	nicable:	Note: All the data collected will only be
2. Copies of Professional Qualification(s)3. Copy of Radiographer Registration		used by the Association and will be treated with strictly confidential.
4. Copy of Identity Card		treated with strictly confidential.

P O Box 73549, Kowloon Central Post Office, Hong Kong.

E-mail: hkrta1965@gmail.com www.hkrta.50g.com 電郵地址: hkrta1965@gmail.com

香港九龍中央郵箱 73549 號