



Member No: AMO09/

Please fill in the application in BLOCK LETTERS.

请填写申请用英文大写字母

Membership Application Form (For Associate Member - Others)		
Name: 姓名		Gender: Male / Female 性别: 男/女
Company Name: 公司名称		
Company Profile: 公司简介		
AVA Licence : 农粮局执照		Designation: 工作置位
Address: 地址		
		Postal Code: 邮政编码
Email: 电子邮件		
Primary Contact: 主要联系方式	Secondary Contact: 第二联系方式	Fax: 传真
Involvement in other fish clubs: Yes / No 参与其他鱼类俱乐部: 是 / 否		
If Yes, please state: 如果有, 请说明		
Signature Of Applicant 申请人签名		Date 日期
For Official Use Only		
Date Joined:		Amount Paid: /
Approved By:		
Remarks:		