

Dear all:

Enjoy VALUE for renewing or applying the Year 2010 & 2011 Membership!

## **NEW PRIVILEGES**

As a member, you will receive,

- 1) **Asia Pacific Journal of Counselling and Psychotherapy** (free for full membership only, please refer to the attached renewal form),
- 2) **Membership Certificates** (Instead of the Membership Card),
- 3) **Invitation to Annual General Meeting,**
- 4) **Discount for training workshops and seminars.**

*And from now on until 31<sup>st</sup> Dec, 2010, you will also receive an extra \$50 Cash Coupon for successful application:*

*For the Year 2010 --> 1 Coupon*

*For the Year 2011 --> 1 Coupon*

*For the Year 2010 & 2011 --> 2 Coupons*

## **APPLICATION**

Simply send in a membership form (see below) and attach a payable cheque of HKD250 for Full members (with supporting document for new applicants) / HKD150 for Associate members to "**Asian Professional Counselling Association (H.K.) Limited**" and mail to "Department of Counselling and Psychology, Hong Kong Shue Yan University, 10 Wai Tsui Crescent, Braemar Hill Road, North Point, Hong Kong, C/O Miss. Liu, Jing Amanda".

Please visit [www.apca-counselling.com](http://www.apca-counselling.com) for more information or contact us at [membership@apca-counselling.com](mailto:membership@apca-counselling.com) if you have any queries.

For and on behalf of  
Membership Department  
Asian Professional Counselling Association (Hong Kong)

New application 新會員       Renewal 更新會籍      Membership No.: \_\_\_\_\_

**Part 1 : Personal Information (Please fill in all of the information in English)**

(updated 28/07/2010)

|                              |                  |       |        |
|------------------------------|------------------|-------|--------|
| Name 姓名(English 英文)          | Dr./Mr./Mrs./Ms. |       |        |
| Name 姓名(Chinese 中文)          | 博士/先生/女士/小姐      |       |        |
| Mailing Address<br>通訊地址      |                  |       |        |
| Name of Organization<br>工作機構 |                  |       |        |
| Position/ Title 職稱           |                  |       |        |
| Telephone Number 電話          | (Off.)           | (Hm.) | (Mob.) |
| Email Address 電郵地址           |                  |       |        |
| Fax 傳真號碼                     |                  |       |        |

**Part 2 : Education**

| Qualification 學歷 | Major 主修 | Institute 學院 | Date Awarded 獲取日期 |
|------------------|----------|--------------|-------------------|
|                  |          |              |                   |
|                  |          |              |                   |
|                  |          |              |                   |

**Part 3 : Professional Experience**

| Organization<br>機構 | Country/Region<br>國家/地區 | Position<br>職位 | Nature<br>性質 | Date 日期 |      |
|--------------------|-------------------------|----------------|--------------|---------|------|
|                    |                         |                |              | From 由  | To 至 |
|                    |                         |                |              |         |      |
|                    |                         |                |              |         |      |

Total number of years in professional counselling work 從事輔導工作之總年數 : \_\_\_\_\_ Years 年

**Part 4 : Membership Categories (Please ✓ in the box)**

Full Member 會員 HK\$250 (please attach copy of certificate 請附證書副本)

Associate Member 附屬會員 HK\$150

Full Member – With Degree, Diploma or Certificate major in counselling or equivalent (**with** voting right)

Associate Member – Undergoing counselling training and with interest in counselling (**without** voting right)

全會員 – 持有輔導學位、文憑或證書, 擁有投票權

附屬會員 – 正接受輔導訓練和對輔導有興趣者, 沒有投票權

The membership year is from 1 January to 31 December.

**Remarks :**

Please make cheque payable to 'Asian Professional Counselling Association (H.K.) Limited' or bank in (Hong Kong Bank 808-021620-292 )and mail to Asian Professional Counselling Association (H.K.) Limited, Department of Counselling and Psychology, Hong Kong Shue Yan University, 10 Wai Tsui Crescent, Braemar Hill Road, North Point, Hong Kong, C/O Miss. Liu, Jing Amanda. For further information, please visit our website: [www.apca-counselling.com](http://www.apca-counselling.com)

Enquiry : **21048232**

Signature 簽署 : \_\_\_\_\_

Date of Application 申請日期 : \_\_\_\_\_

OFFICE USE ONLY

Cheque: \_\_\_\_\_ Rcpt: \_\_\_\_\_ Cash: \_\_\_\_\_ Staff: \_\_\_\_\_ Remarks: \_\_\_\_\_ Date: \_\_\_\_\_