

# ST. TERESA SECONDARY SCHOOL PAST STUDENTS' ASSOCIATION

(MEMBERSHIP APPLICATION FORM)

NAME (*Use block letters*) : \_\_\_\_\_ ( \_\_\_\_\_ )  
*(in English)* *(中文)*

ENTERED SCHOOL YEAR : \_\_\_\_\_ (*Class S.* \_\_\_\_\_)

GRADUATED YEAR : \_\_\_\_\_ (*Class S.* \_\_\_\_\_)

TEL. No.: \_\_\_\_\_ (Home) \_\_\_\_\_ (Mobile) I.D NO. : \_\_\_\_\_

ADDRESS : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E-MAIL ADDRESS : \_\_\_\_\_

REMARKS : \_\_\_\_\_

\*  New Registration       Membership Renewal       Change of Particulars

**\*Please check the appropriate boxes**

(*For Official Only*) MEMBERSHIP NO. : \_\_\_\_\_ ( \_\_\_\_\_ )