



MACAU PRACTICAL SHOOTING CLUB

澳門實用射擊會

APPLICATION FORM

入會表格

Member No.: 會員編號:	Name: _____ (英)	
	姓名: _____ (中)	
相 片 兩 張	Date of Birth: _____ 出生日期:	Sex: _____ 性別:
	Identity Card No.: _____ 身份証號碼:	
	介紹人 Signature: _____ 簽 名:	
Address: _____ 地 址:		
Telephone: 電 話: (Office) _____ (Mobile) _____ (Home) _____ (辦公室) (手提) (家庭)		
Occupation: _____ 職 業:	Member card take already <input type="checkbox"/> 已取會員証	Full member <input type="checkbox"/> Half member <input type="checkbox"/>
Note: 備 註:		
President signature: 會長簽名: _____	Signature 申請人簽名 _____	
Confirm date: _____ 批核日期:	Date: _____	