

REPLY

To: Honorary Secretary
Hong Kong College of Paediatricians
Room 801, Hong Kong Academy of Medicine Jockey Club Bldg.,
99 Wong Chuk Hang Road, Aberdeen
Hong Kong

I accept / do not accept* to become a Member of the Hong Kong College of Paediatricians and am willing to abide by the Oath of the College.

I do wish to have a Certificate, with a cheque of HK\$100 enclosed

Signature _____

Name _____

Type of Membership: Member

Date _____

* Delete as appropriate