





伊利沙伯中學美國同學會

QUEEN ELIZABETH SCHOOL ALUMNI ASSOCIATION (U.S.A.) MEMBERSHIP APPLICATION FORM

Membership Directory)			e "copy and paste" and extract the info into o
		NICKNAME:	
* English: First Name:	Middle Name:	Last Name:	Maiden Name:
* YEAR GRADUATED FROM	FORM V (if applicable):		
* YEAR LEFT Q.E.S. & LAST	FORM ATTENDED:		
HOUSE AFFILIATION AT Q	.E.S.: North South	East West	
(Examples: Class monitor, Prefect		team captain, etc.)	FORM (if applicable)
* HOME PHONE:		HOME FAX	<u></u>
CELL PHONE:			
* E-MAIL ADDRESS:			
COMPANY/WORK FACILIT	Y		
WORK PHONE:			
	J LEFT Q.E.S. (about a 100 words work history, family, hobbies & inte		ded)
* SIGNATURE:			

Please mail the Application Form and membership fee** (make check payable to QESAAUSA) to our treasurer Beth Pao at: 10 Waterford Place, Alameda, CA 94502