



伊利沙伯中學美國同學會

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

* Required: (If you are filling this with the computer, **do not worry about the formatting details**. We'll just use "copy and paste" and extract the info into our Membership Directory)

DATE: _____

* NAME: Chinese: _____ 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

EXTRACURRICULAR ACTIVITIES WHILE ATTENDING Q.E.S. & SPECIFY YEAR AND/OR FORM (if applicable)

(Examples: Class monitor, Prefects, House captain, School swimming team captain, etc.)

* ADDRESS: _____

* HOME PHONE: _____ HOME FAX: _____

CELL PHONE: _____

* E-MAIL ADDRESS: _____

COMPANY/WORK FACILITY _____

WORK PHONE: _____

BRIEF PORTFOLIO SINCE YOU LEFT Q.E.S. (about a 100 words and use additional paper if needed)

(Examples: Education after QES, work history, family, hobbies & interests etc.)

* SIGNATURE: _____

Please mail the Application Form and membership fee (make check payable to QESAAUSA) to our treasurer
Teresa Tam at: 2210 Gellert Blvd., Unit 5302, South San Francisco, CA 94080.**

**** Life Time Membership \$100.00.**