

# WH Fok Professional Services

## Course Application Form

(Please mail to Unit A 20/F, Nine Queen's Road Central, Central, Hong Kong)

|                         |
|-------------------------|
| Course name: _____      |
| Date: _____ Time: _____ |

### Participant Details:

Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_

Contact address: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

| If you are an engineer, please fill in the following: |                            |
|---|----------------------------|
| <u>Name of Institution</u>                            | <u>Grade of membership</u> |
| _____   | _____                      |
| _____   | _____                      |
| _____   | _____                      |

I enclose a cheque no. \_\_\_\_\_ of HK\$ \_\_\_\_\_ payable to  
"WH Fok Professional Services" to cover the course fee\*.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*please enclose original receipt of charity donation if you would like the donated amount to cover part or whole of the course fee.