Application
FOR STUDENT MEMBERSHIP

ASIA PACIFIC DIVISION
FOODSERVICE CONSULTANTS SOCIETY INTERNATIONAL
FCSI APD Secretariat
Suite 901 Level 9, The Hong Kong Club Building, 3A Chater Road, Central, Hong Kong
Tel: (852) 3125 7631 / Fax: (852) 3125 7632 / E-mail: apd@fcsi.org

STUDENT MEMBERSHIP
This application is for students attending an accredited institution of higher learning and enrolled in a foodservice or hospitality related course of study.

GENERAL INFORMATION
(Please type or print legibly)

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<th>□Mr.</th>
<th>□Ms.</th>
<th>Last Name: _______________ First Name: ___________ Middle Initial: __</th>
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<td>E-mail: ________________________________ Date of Birth (Optional): __________________</td>
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<td>School: ________________________________ School Address: ____________________________</td>
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<td>School Website: ____________________________________________________________________</td>
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<td>Course of Study / Major: ____________________________________________________________________</td>
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<td>How did you hear about FCSI? ____________________________________________________________________</td>
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DUES
The FCSI dues year begins January 1. Dues for the first year are pro-rated based on the month in which you join.

Membership in FCSI is recorded in the name of the individual. All funds must be settled in Hong Kong dollars.

Student Dues: HK$640 annually
METHOD OF PAYMENT

You will be billed once your application has been approved. Payment can be made by bank draft, bank TT transfer or credit card. All funds must be settled in Hong Kong dollars.

ACKNOWLEDGEMENT

I agree that all information given FCSI is completed and correct. I further agree to provide additional information, if requested by FCSI. I shall conduct my activities in accordance with FCSI’s Objectives and FCSI’s Code of Conduct. I further waive and release all claims, demands and actions that I now or in the future may have against FCSI, its officers, directors, members and employees for any act or omission in granting or denying membership in FCSI.

Signature ___________________________ Date ______________