



# 香港電影後期專業人員協會有限公司

ASSOCIATION OF MOTION PICTURE POST PRODUCTION PROFESSIONALS (HK) LIMITED

## Full Membership Application Form 正式會員申請表格

正式會員編號 (For Official Use Only)

Full Membership No.: \_\_\_\_\_

中文姓名 \_\_\_\_\_ 英文姓名 \_\_\_\_\_  
Name in Chinese: \_\_\_\_\_ Name in English: \_\_\_\_\_

性別 \_\_\_\_\_ 出生日期 (日/月/年) \_\_\_\_\_ 香港身份證號碼 \_\_\_\_\_  
Sex: \_\_\_\_\_ Date of Birth (dd/mm/yy): \_\_\_\_/\_\_\_\_/\_\_\_\_ HKID No.: \_\_\_\_\_

聯絡電話 \_\_\_\_\_ 電郵地址 \_\_\_\_\_  
Contact No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

曾/現任職公司 \_\_\_\_\_ 職位 \_\_\_\_\_  
Company Name: \_\_\_\_\_ Title / Post: \_\_\_\_\_

郵寄地址 \_\_\_\_\_  
Postal Address: \_\_\_\_\_

從業時間 \_\_\_\_\_ 年 \_\_\_\_\_ 月 \_\_\_\_\_ 你是否“香港電影金像獎”選民? \_\_\_\_\_ 是 \_\_\_\_\_ 否 \_\_\_\_\_  
How long in the industry: \_\_\_\_Year\_\_Month Are you a "Hong Kong Film Awards" voter?  Yes  No



### 專業界別 (請在適當的空格裡畫上剔號) Professional Category (Please tick the appropriate box)

- 數字電影 Digital Cinema       數字後期 DI Post       音響製作 Sound Post       視覺特效 Visual Effects

### 曾參與之項目 Involvement

片名 Film Title	導演 Director	公司 Company	年份 Year
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	Sponsor's _____	_____

本人願意加入 (香港電影後期專業人員協會有限公司) 成為會員, 並遵守一切會規。  
I would like to be a member of the "Association of Motion Picture Post Production Professionals (HK) Limited" (AMP4) and obey its rules and regulations in accordance with the Memorandum and Articles of Association of AMP4.

簽署 \_\_\_\_\_ 日期 \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

所有資料全部保密  
ALL INFORMATION WILL BE KEPT IN STRICT CONFIDENCE

### 請勿填寫本欄 For Official Use Only

會員類別  
Membership Status: \_\_\_\_\_

審核人員  
Approved By: \_\_\_\_\_

審核日期  
Approved Date: \_\_\_\_\_

介紹人姓名  
Sponsor's Name: \_\_\_\_\_

介紹人簽署  
Sponsor's Signature: \_\_\_\_\_

備註  
Remarks: \_\_\_\_\_