

Diocesan Old Girls' Association Limited



Membership Update Form

Please only provide the required information for amendment, and send to: **Diocesan Old Girls' Association Limited, c/o Diocesan Girls' School, 101 Castle Peak Road, Sham Shui Po, Hong Kong SAR. Attn: Membership Sub-committee.**

(In case you have not given us 2 recent photos (1"x1") for making a membership card, please enclose them with this form.)

Membership Number _____

Title : Miss Mrs. Dr. Ms. Other: _____

First Name _____ Middle Name _____ Maiden Name _____ Married Name _____

Home Address _____

Home Tel _____ Mobile Tel/Pager _____ Home Fax _____

Email** _____

Secondary Address _____

Secondary Tel _____ Secondary Fax _____

Year of Form 5 Grad: _____ School House*: Gibbins Hurrell Sawyer Skipton Symons

Profession*: Home Maker Education Law Banking/Financial Medical/Healthcare

Architecture/Engineering Computer/IT Media/Advertising/PR Music/Art

Public Admin/Civil Service Business/Management Other: _____

Job Title _____ Company Name _____

Please indicate if you consent to your job details being included in a professions database to help in planning careers development/recruitment activities for DGS girls*: Yes No

Please indicate if you are interested to participate in a DOGA sub-committee*: Yes No

If so, please specify which sub-committee: _____

Privacy Statement. I understand that all information provided by or coming into your possession regarding me will be kept confidential and will be used by Diocesan Old Girls' Association Limited ("DOGA Ltd") only for the purposes of activities of (i) the DOGA Group (comprising DOGA Ltd and Diocesan Old Girls' Association Foundation Limited); (ii) local and overseas alumnae and old girls' organizations associated or affiliated with the DOGA Group; and (iii) Diocesan Girls' School (the "School") in furtherance of their objects. For the avoidance of doubt, I understand that such information may be passed on or communicated to any of the bodies described in (i) to (iii) above in order to facilitate their communication with me in connection with the aforesaid activities. I undertake not to use any information regarding any other Member of DOGA Ltd (which may come into my possession through or from the DOGA Group) except for genuine purposes of fellowship with her or for the furtherance of the objects of the DOGA Group. I understand that I have a right under the Personal Data (Privacy) Ordinance to make a data access or correction request. I may make such request by applying to The Secretary of DOGA Ltd at 101 Castle Peak Road, Sham Shui Po, Hong Kong SAR.

Signed: _____

FOR OFFICE USE ONLY: Membership _____ Remark _____ Update _____

*Please tick one only.

**Unless otherwise indicated, regular correspondence will be made via email or to your home address.