



香港執業牙科醫生協會

Hong Kong Practising Dentists Association

Website: www.hkpdna.org

E-mail: hkpdna@gmail.com

CORPORATE MEMBERSHIP APPLICATION FORM

Name of Dental Company : _____

Correspondence Address : _____

Tel No./Fax No. : _____

Email : _____

Number of dental branches : _____

Number of dental chairs : <10 10-30 >30

Number of dentists : <10 10-30 >30

Contact person : _____

Email of contact person : _____

Signature _____

Name (in block letter) _____

Position _____

Date _____

For HKPDenA record:

Received on _____ Approved on _____

Signature: _____