社團法人台灣醫病和諧推廣協會

個人會員入會申請書 日期：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性別 |  | | | 出生年月日 | | 年 月 日 | | | | | |
| 出生地 |  | | | 身分證統一編號 | | | | |  | | | | | | |
| 現在通訊地址 | 公 司 | | | | | | | | | | | 郵遞區號 | | |  |
| 住 家 | | | | | | | | | | | 郵遞區號 | | |  |
| 電 話 | | 公司( ) | | | | 住家( ) | | | | 行動 | | | | |
| 傳 真 | | 公司( ) | | | | 住家( ) | | | | 行動 | | | | |
| E-mail | |  | | | | | | | | | | | | |
| 永久通訊地址 |  | | | | | | | | | | | | 郵遞區號 |  | |
| 電話 |  | | | | | | 聯絡人 | | | | | 關係 |  | |
| 學歷 |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| 經歷 | 現任 | | | | | | | 曾任 | | | | | | | |
|  |  | | | | | | |  | | | | | | | |
|  |  | | | | | | |  | | | | | | | |
| 專長 |  | | | | | | | | |  | | | | | |
| 興趣 |  | | | | | | | | |
| 任何人或  媒體介紹 | 介紹人 | |  | | | | |  | |
| 媒 體 | |  | | | 其他 | |  | |
| 申請人 | (簽章) | | | | | 日期 | |  | |
| 備註 |  | | | | | | | | |

以下各欄申請人免填寫

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 審查 | 初審 |  | 複審 |  |
| 會員類別 |  | 會員證號碼 |  |
| 備註 |  | | |