

# THE CHUE FOUNDATION

## 海外中華命理堪輿研究學會

### Membership Application Form: Personal Details Page 1 of 3

PLEASE COMPLETE IN BLOCK CAPITALS	
Title:	
*Surname:	
*First Name:	
Home Address:	
*Town:	
Postal Code:	
*Country:	
* Contact Telephone No:	
Mobile: if different from above	
Fax:	
*Email:	
*Website:	
Please note, the details marked with an asterisk* will appear on the Chue Foundation website, and will be used by the Chue Foundation to contact you. Should you <b>not</b> wish your details to be published, please mark the undernoted box.	
<input type="checkbox"/> I do not wish my details to be shown on the website.	
Data Protection Act To see how we use your information, please read the Data Protection Statement at <a href="http://www.chuefoundation.com">http://www.chuefoundation.com</a> . By signing this form you are agreeing your data can be used as described.	

For membership secretary use

Welcome	Add to contacts	Receipt
Database updated	E-group invite	Handbook/Leaflets



