**贊助會員會籍資料卡**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **公司基本資料** | | | | | | | | | | | | | | | | | | | | |
| 名稱 | (中文)  (英文) | | | | | | | | | | | | | | | | | | | |
| 統編 |  |  | |  |  |  | | |  | |  |  | 網 址 | | |  | | | | |
| 電話 |  | | | | | | | | | | | | 傳真 | | |  | | | | |
| 地址 | □□□□□□ | | | | | | | | | | | | | | | | | | | |
| 型態 | □ 獨資 □合股 | | | | | | | 資本額 | | 新台幣 元 | | | | | | | | | | 參加勞保員工：計 人  (男: 人 、女: 人) |
| **證照名稱** | | | | | **發證機關** | | | | | | | **發證日期** | | | | | **證書字號** | | | |
|  | | | | |  | | | | | | |  | | | | |  | | | |
|  | | | | |  | | | | | | |  | | | | |  | | | |
| **負責人基本資料** | | | | | | | | | | | | | | | | | | | | |
| 姓名 |  | | | | | | 性別 | | □ 男 □女 | | | | | | 生日 | | |  | | |
| 電話 |  | | | | | | 傳真 | |  | | | | | | E-mail | | |  | | |
| 通訊  地址 | □□□□□□  □同上 | | | | | | | | | | | | | | | | | | | |
| **會員代表資料** | | | | | | | | | | | | | | | | | | | | |
| 會員代表  姓名 | | | (中文) | | | | | | | | | | | 部門 | | | | |  | |
| (英文) | | | | | | | | | | | 職稱 | | | | |  | |
| 出生年月日 | | | 民國　　　年　　　月　　　日 | | | | | | | | | | | 性別 | | | | | □男/□女 | |
| 電話號碼 | | | (　　) | | | | | | | | | | | 學歷 | | | | |  | |
| 電子郵件 | | |  | | | | | | | | | | | | | | | | | |