



Membership Application Form 入会申请表

Name (as in NRIC/passport) : _____ English Name (if any): _____

中文姓名 : _____ 公民 : _____

NRIC/Passport No. 身份证/护照编号 : _____ 公民 : _____

Birth Date 出生日期 (DD/MM/YYYY) : ____ / ____ / 19 ____ Nationality 国籍: _____

Marital Status 婚姻状况 : _____ Race 种族: _____ Dialect 籍贯: _____

Highest Qualification 最高学历 : _____

Home Address 住宅地址 : _____

Mobile No(s). 手机号码 : _____

Home Tel. 住宅联系电话 : _____ Home Fax 住宅传真: _____

Email 电子邮件 : _____

Occupation/Profession 职业/专业 : _____

Company/Employer 公司/雇主 : _____

Designation 职称 : _____

Office Address 工作地址 : _____

Office Tel. 工作电话 : _____ Office Fax 工作传真: _____

Hobbies/Interests 嗜好/兴趣 : _____

I wish to apply for membership in the Singapore Business and Professional Women's Association – Mandarin Chapter (SBPWA-Mandarin Chapter). If accepted, I agree to abide by the constitution and any by-laws of the Association. I will do my very best to contribute to the Association.

我谨此申请为新加坡商业暨专业妇女协会-华文分会 (简称为商专妇女会 - 华文分会) 会员。若蒙接受，本人同意遵守协会章程与会规，暨尽力为协会贡献。

The following two SBPWA-Mandarin Chapter members have agreed to sponsor my application:

以下两位商专妇女会-华文分会会员愿意作我入会申请之介绍人:

Proposer 第一会员介绍人: _____ Seconder 第二会员介绍人: _____

Entrance and
Subscription Fees
入会费与年会费

Entrance Fee 入会费 S\$25.00 + Annual Subscription Fee 年会费 S\$ 80.00 = S\$105.00

Signature and Date 签名与日期: _____

For Office Use Only: Membership Application Accepted / Rejected. Membership Chairperson: _____
 Received S\$ _____ in Cash/Cheque (Bank _____ No. _____). Honorary Treasurer: _____