CO-OPERATIVE OF SCDF EMPLOYEES LIMITED

37 Gul Avenue, Singapore 629677

MEMBERSHIP APPLICATION FORM

☐ please tick accordingly

APPLICATION FOR MEMBERSHIP

☐ **ORDINARY MEMBER**

PERSONAL PARTICULARS *(Please fill in your particulars as in NRIC. Please enclosed a copy of your NRIC.)*

Name
(Please underline Surname/Family Name)

Sex ☐ **Male** ☐ **Female**

Date of Birth
D D / M M / Y Y Y Y

Race ☐ Chinese ☐ Malay ☐ Indian ☐ Eurasian ☐ Others:_____

NRIC No.

☐ **Pink** ☐ **Blue**

Address

Singapore

Nationality
☐ **Singaporean** ☐ **Malaysian** ☐ **Others:** _____

Residential Status
☐ **Singapore Citizen** ☐ **Permanent Resident**

Mailing Address

Singapore

Marital Status
☐ **Single** ☐ **Married** ☐ **Others:** _____

CONTACT NUMBERS & EMAIL ADDRESS

Home No.
Office No.
Mobile No.

Email Address

EMPLOYMENT DETAILS

FOR ORDINARY MEMBER

Scheme of Service ☐ **Senior Officer** ☐ **Emergency Response Specialist** ☐ **Civilian**

FEES

I agree, if admitted, to pay the following:-					
Entrance Fee @ $10.00 (waived)				-	(a)
1 lot of compulsory share at $20.00				$20	(b)
No. of additional lots of shares taken up at $20.00 per lot	_____	x $20	=	$____	(c)
Total Amount				____	(b) + (c)

Please make out a cheque payable to: Co-operative of SCDF Employees Limited

_____ **Signature of Applicant**

_____ **Date**

OFFICIAL USE

☐ Information Checked Effective Date of Joining Co-op ☐☐ / ☐☐ / ☐☐☐☐

Checking Officer