



“AGEING IN STYLE” MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:

Date of birth:	IC/Passport #:	Phone:
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Email:	Race:	Religion:
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Current address:

EMPLOYMENT INFORMATION

Current employer:

Job Position:	Duration:
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EMERGENCY CONTACT

Relative Contact:

Address:	Phone:
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Relationship:

SPOUSE INFORMATION IF JOINT MEMBERSHIP

Name:

Date of birth:	IC/Passport #:	Race:
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Religion:	E-mail:	Phone:
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SIGNATURES

I authorize the verification of the information provided on this form are correct. I have received a copy of this application.

Signature of applicant:	Date:
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Signature of spouse (<i>only if for a joint membership</i>):	Date:
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Please be informed that “Ageing In Style” membership is **FREE of charge** but **it is compulsory for all members to have their own individual Member’s Badge which cost at S\$2.00 only**. Members must be 30 years old and above to be qualified for this membership. During all activities conducted by us, members must put on their badge at all time. Incase of lost or stolen of Member’s Badge, members must inform us immediately and **new card will be issued in 3 working days at surcharged of S\$2.00**. Please do take care of your Member’s Badge as all privileges will not be entitled to you if you are without your badge. Thank you for being a member of “Ageing In Style”.

Membership Serial Number:

Member’s Signature of receiving badge: