

准学生会籍入会申请表格

ASSOCIATE STUDENT MEMBERSHIP APPLICATION FORM



请将入会申请表连同学生证彩色复本和注明付予"SCCCI"的付费支票一起寄交:

会员事务部门, 新加坡中华总商会, 裕廊镇大会堂路9号, 商团中心, #04-01, 新加坡邮区 609431

❖ 常年会费 - \$24* (包含7%消费税) ❖ 首年会费将按加入月份比率计算, 请与会员部查询详情。

To apply, please send the completed application form with a colored photocopy of your Student Pass/Matriculation Card and a crossed cheque made payable to "SCCCI" and mail to:

The Membership Department, SCCCI, 9 Jurong Town Hall Road, #04-01, Trade Association Hub, Singapore 609431

❖ Annual Fee: \$24* (includes 7% GST) ❖ Annual fee is pro-rated in the first year of joining.

Please contact Membership Department for further information

供本会专用 FOR OFFICIAL USE

批准人 Approved By:

核准日期 Approved Date:

会籍编号 Membership No.:

查询 For enquiries:

电话 Tel: 63378381 传真 Fax: 63390605 电邮 E-mail: membership@sccci.org.sg 网址 Website: http://www.sccci.org.sg

您是如何认识本会? HOW DID YOU GET TO KNOW US?

入会邀请函 Invitation Letter 媒体 (报章/电视/电台/杂志/互联网) Media (Newspaper/TV/Radio/Magazine/Internet)

座谈会/研讨会/工作坊 Talks/Seminars/Workshops 家属/朋友 Family/Friends 其他(请注明) Others (please specify): _____

个人详情 PERSONAL DETAILS

- 姓名 (中文) _____ 姓名 (English) _____
_____ 生/女士/小姐 _____ Mr/Mdm/Ms _____
- 国籍 Nationality _____ 3. 种族 Race _____ 4. 性别 Sex: 女 Female 男 Male
- 身份证号码 NRIC No. / 护照号码 Passport No. _____ 6. 出生日期 Date of Birth _____ 7. 学号 Matriculation No. _____
- 住家地址 Home Address _____
- 住家电话号码 Home Tel No. _____ 10. 手机号码 Mobile No. _____
- 电子邮箱 (共联系用) Email Address (For communication purposes) _____
- 奖状 (如有) Awards (If any) _____ 13. 其他会籍 Membership(s) in Other Association/Clubs _____
- 兴趣 Hobbies _____ 15. 目前教育程度 Current Educational Level _____

学习状况 ABOUT MY STUDIES

- 报读学位 Name of Pursuing Qualifications _____
- 报读学院 Name of Tertiary Institution _____
- 主修科目 Discipline/Specialisation _____
- 入学年份 Year of Commencement _____ 5. 预计毕业年份 Project Year of Completion _____

为遵守“个人信息保护法令”, 请注明您是否同意总商会使用您的个人资料, 用于发送总商会活动、服务、调查研究及信息。

In compliance with the Personal Data Protection Act, we seek your consent for SCCCI to collect, use and disclose your personal data for the purposes of conducting SCCCI's analytics and research activities, event notification and publicity and SCCCI news dissemination only. 同意 Agree 不同意 Disagree

若同意, 请选择沟通方式及沟通媒介 If you agree, please indicate your preferred mode of communication and language medium:

沟通媒介 Preferred Language Medium (please choose only one 只能选一项): 中文 Chinese 英文 English 中英文 Bilingual

我慎重声明以上所提供的资料正确无误。I certify that the above information given is correct and true to the best of my knowledge.

1. 姓名和签名 Name & Signature _____

2. 日期 Date _____