

To: Singapore Chinese Chamber of Commerce & Industry

MEM/CHG/

47 Hill Street #05-01/02, SCCCI Building

Singapore 179365

E-mail: membership@sccci.org.sg Fax: 6339 0605 Tel: 6337 8381

究及信息。In compliance with the Personal Data Protection Act, we seek your consent for SCCCI to collect, use an personal data for the purposes of conducting SCCCI's analytics and research activities, event notification and publicity news dissemination only. □ 同意Agree □ 不同意Disagree	更换新加坡中华总商会商号/商团代表人 CHANGE OF SCCCI CORPORATE / TRADE ASSOCIATION REPRESENTATIVE		
直线 Direct Line 电邮 E-mail 本商团/公司新任代表人资料如下 Particulars of our new Representative are as follows: 姓名(中文) Name (Chinese): 姓名(英文) Name (English): 称呼: (先生 / 小姐 / 女士 / 博士 / 医生 / 教授) 易份证号码 NRIC No. / 护照号码 Passport No	—— 商团/公司(中文及英文)名称 Trade Association / Company Name (Chinese		
本商团/公司新任代表人资料如下 Particulars of our new Representative are as follows: 姓名(中文) Name (Chinese): 姓名(英文) Name (English): 称呼: (先生 / 小姐 / 女士 / 博士 / 医生 / 教授) 身份证号码 NRIC No. / 护照号码 Passport No. 山生日期 D.O.B. (Last 3 digits + last letter of NRIC) 种族 Race 国籍 Nationality 本地或永久居民 LOCAL or PR 口是职衔 Designation: 重线 Direct Line 手机 HP No. 电邮 E-mail 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、究及信息。In compliance with the Personal Data Protection Act, we seek your consent for SCCCI to collect, use an personal data for the purposes of conducting SCCCI's analytics and research activities, event notification and publicity news dissemination only. 一同意为gree 一不同意Disagree 若同意,请选择沟通方式及沟通媒介语。If you agree, please indicate your preferred mode of communication medium. (Please choose only one 只能选一项) 沟通方式 Preferred Mode of Communication: 中文Chinese □ 中文Chinese	者姓名 Requestor Name	ion	
姓名(中文) Name (Chinese): 姓名(英文) Name (English): 称呼: (先生 / 小姐 / 女士 / 博士 / 医生 / 教授) 另	Direct Line 电邮 E-r		
姓名(英文) Name (English): 称呼: (先生 / 小姐 / 女士 / 博士 / 医生 / 教授) 易份证号码 NRIC No. / 护照号码 Passport No. (Last 3 digits + last letter of NRIC) 种族 Race 国籍 Nationality 本地或永久居民 LOCAL or PR □是职衔 Designation: 事机 HP No 电邮 E-mail			
称呼: (先生 / 小姐 / 女士 / 博士 / 医生 / 教授) Salutation: (Mr / Ms / Mdm / Dr / Prof) 身份证号码 NRIC No. / 护照号码 Passport No	中文) Name (Chinese) :		
身份证号码 NRIC No. / 护照号码 Passport No	英文) Name (English) :		
(Last 3 digits + last letter of NRIC) 种族 Race	称呼: (先生 / 小姐 / 女士 / 博士 / 医生/ 教授) Salutation: (Mr / Ms / Mdm / Dr / Prof)		
职衔 Designation:	•		
手机 HP No	Race 国籍 Nationality	_OCAL or PR □是 Yes □不是 No	
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、究及信息。In compliance with the Personal Data Protection Act, we seek your consent for SCCCI to collect, use an personal data for the purposes of conducting SCCCI's analytics and research activities, event notification and publicity 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语。If you agree, please indicate your preferred mode of communication medium. (Please choose only one 只能选一项) 沟通方式 Preferred Mode of Communication: □ 电邮 E-mail □ 邮寄 Mail 沟通媒介语 Preferred Language Medium: □ 中文Chinese □ 英文English □ 中英文Chinese a	Designation:		
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沟通方式 Preferred Mode of Communication: 口 电邮 E-mail	若同意,请选择沟通方式及沟通媒介语。If you agree, please indicate your preferred mode of communication and language		
	方式 Preferred Mode of Communication: □ 电自		
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 kno	媒介语 Preferred Language Medium: ロ中ス	□ 中英文Chinese and English	
	重声明以上所提供的资料正确无误。I certify that	e to the best of my knowledge.	
	签名 Signature	商团/公司盖章 TA/Company Stamp	

现任代表人是董事吗? Is the existing representative a council member? □是 Yes □不是 No

会员编号 Member ID: _____ 审查员 Updated by: ____ 更新于 Updated on: _