



新嘉坡延陵吳氏總會

YEN LENG GOH CLAN GENERAL ASSOCIATION SINGAPORE

10 Mohamed Sultan Road, Singapore 238960 Tel: (65) 67371248

Email: admin@yenlenggohclan.org.sg

Website: www.yenlenggohclan.org.sg

护照型
照片

Passport
size photo

申请入会表格

APPLICATION FORM

姓名 NAME: 中文 CHINESE: _____ 英文 ENGLISH: _____

国籍 NATIONALITY: _____ 籍贯 COUNTRY OF BIRTH: _____ 性别 GENDER: M/F

*身份证号码 NRIC: _____ 出生日期 DATE OF BIRTH: ____ DD / ____ MM / ____ YY

住址 RESIDENTIAL ADDRESS: _____

电话 TEL 住宅 RES: _____ 手机 HP: _____ 办公室 OFFICE: _____

电邮 EMAIL: _____

学历 QUALIFICATION: _____ 职业 OCCUPATION: _____

介绍人 PROPOSER: _____

备注:

* 通过申请会员资格并签署会员表格, 申请人自愿给予或被视为已经同意总会收集, 使用或披露其NRIC中的信息(根据个人隐私保护法第 13 条)。

Remarks:

* By applying for membership and signing the membership form, the Applicant has voluntarily given or is deemed to have given his/her consent to the collection, use or disclosure of the information in the NRIC by the Association (As per Section 13 Personal Data Protection Act).

余谨此申请加入新加坡延陵吴氏总会成为永久会员/准会员, 并同意遵守 总会之章程及条规。

I wish to apply as a Life Member/Associate Member of the Yen Leng Goh Clan General Association Singapore and agree to abide by its Constitution and Bye Laws.

申请者签名 SIGNATURE OF APPLICANT: _____ 日期 DATE: _____

以上申请为会员者, 经于____年 ____月 ____日 经第____届第____次执委会会议通过批准为本会永久会员/准会员。

会员编号 Membership Number: _____

会长签名: _____