SINGAPORE JAIN RELIGIOUS SOCIETY

Srimati Nirmalaben Chandulal Doshi Jain Sthanak

18 Jalan Yasin, Singapore 417991 • Katong P.O. Box 106, Singapore 914304
Phone 6742 7829 • Email: sjrs@sjrs.org.sg

MEMBERSHIP APPLICATION FORM

Application Date _ _ _ _ _ _ _ _ *ddmmyyyy*

Membership Type **LIFE ($500) / ORDINARY ($40) ***

(A) MEMBER'S DETAILS

Name (Use BLOCK LETTERS) *Underline Surname* MR/MRS/MS/DR*

Date of Birth _ _ _ _ _ _ _ _ *ddmmyyyy*

Gender ☐ MALE ☐ FEMALE

Address ----------

City SINGAPORE*/ ----------

Country SINGAPORE*/ ----------

Postal Code _ _ _ _ _ _

Telephone Nos. *(include country & area code for non-Singapore nos.)*

Home _ _ _ _ _ _ _ _ _ _ _ _

Mobile _ _ _ _ _ _ _ _ _ _ _ _

Email

(B) FAMILY DEPENDENTS

	Name	Relationship	Date of Birth	Mobile	Email
1					
2					
3					
4					
5					
6					
7					
8					

Proposed by: ---------- Seconded by: ----------

Instructions:

Please complete the form with full details & hand it in, together with cash, or cheque in favour of "**SINGAPORE JAIN RELIGIOUS SOCIETY".**

Please indicate your full name and contact number on the back of the cheque. You can also mail in the form together with your cheque payment to: **SJRS, Katong P.O. Box 106, Singapore 914304.** Do not send Cash by mail.

Applicants for ORDINARY MEMBERSHIP are requested to also fill in the "Payment By GIRO" form for automatic renewal of their membership.

Unless renewed earlier, all ORDINARY MEMBERSHIPS expire on 31st December.

For Official Use

Received CASH / CHEQUE * payment by _____ *(Treasury initial)*

Approved on (effective date of membership) _ _ _ _ _ _ _ _ *ddmmyyyy*

Updated by _____ *(initials)* on _____ *(date)*

**delete where applicable*