

# SINGAPORE JAIN RELIGIOUS SOCIETY

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18 Jalan Yasin, Singapore 417991 · Katong P.O. Box 106, Singapore 914304  
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## MEMBERSHIP APPLICATION FORM

Application Date          
ddmmyyyy

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

### (A) MEMBER'S DETAILS

Name (Use BLOCK LETTERS) <u>Underline Surname</u>		MR/MRS/MS/DR*
First Name	Father/Spouse Name	Surname / Family Name
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> dd mm yyyy	Jain? Yes <input type="checkbox"/> No <input type="checkbox"/> Gender <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Address		
City SINGAPORE*/		
Country SINGAPORE*/		
Postal Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Telephone Nos. (include country & area code for non-Singapore nos.)		
Home <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Email <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

### (B) FAMILY DEPENDENTS

	Full 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, cheque in favour of "SINGAPORE JAIN RELIGIOUS SOCIETY" or PayNow to UEN S72SS0036D. 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.

Cheque Number: \_\_\_\_\_ / PayNow Sender's Name: \_\_\_\_\_ / Cash

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

### For Official Use

Received CASH / CHEQUE / PAYNOW \_\_\_\_\_ (Treasury initial)

Approved on (effective date of membership)          
ddmmyyyy

Updated by \_\_\_\_\_ (initials) on \_\_\_\_\_ (date)



\*delete where applicable