



MEMBERSHIP APPLICATION FORM

PERSONAL PARTICULARS	
Salutation: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Others: _____	NRIC No: [Last 3 digits and alphabet]
Name (as in NRIC): [<u>Underline Surname</u>]	Citizenship: <input type="checkbox"/> Singaporean <input type="checkbox"/> S'pore PR
Address:	Race: <input type="checkbox"/> Chinese <input type="checkbox"/> Malay <input type="checkbox"/> Indian <input type="checkbox"/> Eurasian <input type="checkbox"/> Others (Pls specify) _____
Date of Birth: [dd/mm/yyyy]	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Contact Details: Mobile: _____ Home: _____	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
Personal Interest(s) or Service(s) which you wish to volunteer with Silver Horizon Travel Co-operative Ltd:	

NEXT OF KIN DETAILS		
Name:	Relationship:	Contact No:

MEMBERSHIP APPLICATION		
I would like to apply for the following membership:		
<input type="checkbox"/> ORDINARY MEMBERSHIP <i>[with one voting right]</i>	<input type="checkbox"/> ASSOCIATE MEMBERSHIP <i>[without voting right]</i>	INSTITUTIONAL MEMBERSHIP is open to co-operative societies & trade unions only. Please contact us separately for application.
ENTRANCE FEE AND SHARE SUBSCRIPTION PAYABLE		
Entrance Fee: \$50.00 20 Shares of \$50 per Share: \$1,000.00 TOTAL: \$1,050.00	Entrance Fee: \$50.00 1 Share of \$50 per Share: \$50.00 TOTAL: \$100.00	

PAYMENT DETAILS	
If payment is by internet bank transfer, please credit the respective amount above to OCBC Bank a/c: 641-444-799-001 . You can also use your bank mobile app to scan the QR code on right or enter UEN No. T12CS0001H to pay. Please indicate your name in the transaction reference or contact Dr Shirley Wan (mobile: 88698980; email: shirleywan@silverhorizontravel.com) with details of your transaction.	
If payment is by cheque, please make cheque payable to: Silver Horizon Travel Co-operative Ltd . If you are dropping the cheque off into the OCBC Quick Cheque Deposit box, do also write our account no (641-444-799-001) at the back of the cheque and contact Dr Shirley Wan (mobile: 88698980; email: shirleywan@silverhorizontravel.com) with details of your bank, cheque no and date of deposit.	
<i>Note: Membership application will only be processed upon clearance of cheque or receipt of fund.</i>	

Silver Horizon Travel Co-operative Ltd
 uen: T12CS0001H add: c/o Dr Shirley Wan, 9 Dairy Farm Heights #04-23, The Skywoods, Singapore 677670
 em: enquiry@silverhorizontravel.com web: www.silverhorizontravel.com fb: Silver Horizon Travel Co-op Ltd

SHARE NOMINATION DETAILS (one nominee only; to be returned to upon death)	
Nominee Name: <i>[As in NRIC]</i>	NRIC No: <i>[Last 3 digits and alphabet]</i>
Relationship with Applicant:	Nominee Contact Details: Phone: _____ Email: _____

PROPOSER & SECONDER DETAILS			
Name:	Membership No:	Name:	Membership No:
Signature:		Signature:	

DECLARATION & FORM SUBMISSION		
<p>I hereby declare to the best of my knowledge that the particulars furnished in this application form are true and that I have not wilfully suppressed any material information that will be prejudicial to the objectives and operations of Silver Horizon Travel Co-operative Ltd (SHTCL). Any false declaration and/or withholding of material information shall subject my membership status to review by the executive committee at an appropriate date to be decided. In accordance with the pertinent By-laws on Membership (as referenced in the section below), I declare that I am eligible to apply for membership.</p> <p>The full By-laws shall be made available to me once my membership application is approved and I will undertake to read and familiarize myself with the By-laws.</p>		
<table border="1"> <tr> <td>Applicant Signature:</td> <td>Date:</td> </tr> </table>	Applicant Signature:	Date:
Applicant Signature:	Date:	
<p>Please complete and submit the signed form either through email at shirleywan@silverhorizontravel.com or print out, complete and post together with cheque to: C/o Dr Shirley Wan, 9 Dairy Farm Heights #04-23, The Skywoods, Singapore 677670. If you are paying by online bank transfer or dropping the cheque off at the Quick Cheque Deposit box, please note instructions under PAYMENT DETAILS.</p>		

<p>SHTCL Personal Data Protection Policy:</p> <ol style="list-style-type: none"> By submitting information to or signing up on this form, or participating in organized activities by SHTCL, you agree to consent to SHTCL collecting, using, disclosing & sharing of your personal data, for the purpose of our administration & communication of our services, programmes & any other purpose that is reasonably related to this form or activity. SHTCL respects personal data and privacy, and will not share such information with any third parties unless authorized to do so. if you have any queries, kindly contact us by email at enquiry@silverhorizontravel.com, or write to us at the mailing address: C/o Dr Shirley Wan, 9 Dairy Farm Heights #04-23, The Skywoods, Singapore 677670.

<p>SHTCL By-laws on Membership:</p> <p>Ordinary and Associate Membership of the Society shall be open to all individual persons, who shall –</p> <ol style="list-style-type: none"> have a passion for travel and living life to the fullest; be 40 years of age or above; Be citizens of or residents in Singapore; be of good character; not be legally or mentally disabled; not be undischarged bankrupts; and not be convicted of an offence punishable with imprisonment.

For SHTCL Use	Bank/Cheque No. &/or Transaction Ref: _____	Approved by Exco on _____
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