

UPDATE OF MEMBER'S INFORMATION

MEMBER'S PARTICULARS								
	n: Mr Mrs Ms Dr							
	ne:							
	hip No:							
	No:							
Nationali	ty:	Race:		Marital S [.]	tatus:			
Address:								
Residenti	al Tel: Mobile							
VEHICLE INFORMATION								
No.	Vehicle Number		In-Vehicle Unit Number (IU)					
1								
2								
MEMBER'S BUSINESS INFORMATION								
Company Name:								
Company	Address:							
Position I	Held:							
Office Tel:		DID:		Fax:				
Office Em	nail:							
Correspondence to be sent to Residential Address Company Address								
EMERGENCY CONTACTS (Excluding Principal & Spouse Members)								
Contact	Name			Relationship	Contact No.			
	Name				333303			
1								

SPOUSE'S PARTICULARS									
Salutation: Mr Mrs Ms	s 🗌 Dr 🗌 Mdm 📗 Othe	ers							
First Name:	Last Name:								
NRIC No / FIN No:	Passport No:	Passport No: Date of Birth:							
Nationality:	Race:								
Residential Tel:	Mobile:	Email:							
SPOUSE'S BUSINESS INFORMATION									
Company Name:									
Company Address:									
Position Held:									
Office Tel:	DID:	Fax: .							
Office Email:									
Correspondence to be sent to Residential Address Company Address									
CHILDREN'S INFORMATION (No. of children)									
Please provide a copy of birth certificate for new addition.									
No Name (under	21 years old)	Date of Birth	NRIC No / Passport No	Gender (M / F)					
1									
2									
3									
4									
5									
As a Member, I / we agree to compl he same may from time to time be			I By-Laws of th	e Club, as					
Applicant's Signature & Date	Spouse's Signature & Date								