



Genealogy Society Singapore

新加坡族譜學會

3 Jalan Arif, Singapore 548790

Email: contactus@genealogysocietysingapore.com Website: www.genealogysocietysingapore.com



Membership Application Form 入会申请表

Applicant Particulars 申请人资料				
中文名 Chinese Name				身份证号码 NRIC No: XXXX/X
英文名 English Name				出生日期/地方 Date & Place of Birth
国籍 Nationality		第几代移民 Which generation immigrant		年龄 Age
				性别 Sex
联系地址 Contact Address				
手机 Mobile		住家电话 Residence No		办公电话 Office No
电邮 Email				
祖籍 Ancestral Hometown (e.g China / 中国) :				
省 Province		市[县] City		镇[乡] Town
村 Village				方言群 Dialect Group
其他资料 Other information				
教育背景 Education Background	小学/中学/大专/研究生* Primary/Secondary/Tertiary/Postgraduates*			职业 Occupation
语文能力 Language Ability/ Reading & Writing	*华语 / 英语/ 其他: *Chinese/English/Others:		家庭用语 Language used at Home	*华语 / 英语/ 其他: *Chinese/English/Others:
参加其他社团/社会 服务 Member Of Society/ Community Service	*是 / 否。 如是, 请提供资料与职责			

*Please delete where appropriate

参加学会的目的 Objectives in joining this Society	<ol style="list-style-type: none"> 1. 对族谱感兴趣 Interested in Family History 2. 想参加推广谱学的活动 Want to promote Family History activities. 3. 对谱牒文话有好奇心 Curious about Genealogy 4. 想寻根溯源，修建家谱 Want to trace my family roots & construct my family history 5. 出于对文化，传承的重视 Interested in culture and heritage. Circle the items you agree with (e.g. 1&2)		
对族谱学会的期待 My expectation of the Society if any			
短期 Short Term		长期 Long Term	

本人理解新加坡族谱学会的章程，谨此申请入会

I, having understood the constitution of the Genealogy Society Singapore, will abide by it and hereby apply to be a member.

通过签署本会员申请表格，我同意学会可以使用本申请表格中提供的个人信息，以便(a)考虑本会员申请;和(b)计划对会员有益的活动。本会将会员个人信息严加保密，并只用于上述(a)和(b)的用途。

By signing this membership application form, I agree that the Society may use my personal data, as provided in this application form, for the purpose of (a) the processing of this membership application; and (b) the planning of programs for the benefit of members. The Society will keep members' personal data strictly confidential and for the aforesaid usage only.

Signature of Applicant / Date

Submission and Payment (Life Membership \$300)

Please send your Application Form (in word /pdf / scan or photo) via WhatsApp / Email / Post to the Membership Director.

Payment method:

- Make a payment transfer 进行付款转账– PAYNOW TO UEN: T09SS0254L
Take a screenshot as proof of payment and WhatsApp to the Membership Director at +65 94558903
or
- Send a cheque payment by post to the Membership Director 通过邮寄方式发送支票付款 at Blk 40, #11-21 Kovan Rise, Singapore 544728
Cheque payable to “Genealogy Society Singapore” and write your name and indicate “ New Member” at the back of the Cheque.

For Internal Use Only

推荐者 1(会员名,签名和日期)

Endorsed by Member 1 (name, signature & date)

推荐者 1(会员名,签名和日期)

Endorsed by Member 2 (name, signature & date)

准请/推绝* | 会长签名
Approved/Rejected*
President Signature

备注Remarks

会员号码Membership No.: _____

收据号码Receipt No.: _____