



新加坡福建会馆普通会员入会申请表

SINGAPORE HOKKIEN HUAY KUAN ORDINARY MEMBERSHIP APPLICATION FORM

申请须知和条款:

1. 申请人必须符合下列所有条件*:
 - a. 新加坡公民年满 21 岁或以上;
 - b. 户籍福建;
 - c. 心智健全;
 - d. 未曾因刑事罪名被监禁超过 1 年以上或罚款超过 S\$5000。
2. 申请表格上须有两位现有会员作介绍人并签名。
3. 申请人须亲临福建会馆办公室 (信立路 5 号新加坡邮区 466781) 呈交已填妥的表格并出示所有证件原件*以供核实。所有申请须支付 S\$720 (含入会费 S\$600 及五年年捐 S\$120)。申请一经批准, 将不予退还任何费用。
4. 本会馆理事会有权拒绝任何申请而无须提供任何理由。
5. 本会馆有权随时增订或修改上述任何条件。

*完整入会申请必须附上相关证件副本以及电子版个人近照, 详情请参考附件《入会申请清单》。

Terms and Conditions:

1. The applicant must meet the following requirements*:
 - a. be at least 21 years of age and a Singapore citizen;
 - b. an ethnic Chinese whose ancestry can be traced to Fujian Province;
 - c. be of sound mind;
 - d. must not have been sentenced to imprisonment for more than 1 year and/or imposed a fine exceeding S\$5,000 for any criminal offence.
2. The application must be sponsored by 2 existing members of Singapore Hokkien Huay Kuan.
3. Completed form must be submitted to our office at 5 Sennett Road Singapore 466781 in person. Applicant must bring along all original documents* for verification. All application is to be accompanied by a non-refundable payment of S\$720 (inclusive of S\$600 entrance fee and 5-year subscription of S\$120).
4. The Singapore Hokkien Huay Kuan Executive Council retains the full discretion to reject any application for membership without providing any reason.
5. The conditions for membership may be amended by Singapore Hokkien Huay Kuan from time to time.

* Please refer to attached CHECKLIST FOR APPLICANT and furnish all required supporting document copies and softcopy of your recent passport photo to complete your application.

个人资料 PERSONAL PARTICULARS

Name of Applicant (English): Underline Surname		申请人姓名(中文):	
新加坡身份证号码(最后 3 个数字及字母): Singapore NRIC No (last 3 digits & checksum):	- - - - -	出生日期: Date of Birth:	DDMMYYYY
性别: 男 / 女 Gender: Male / Female	祖籍地详情(市 / 县 / 乡镇): Ancestry Location Details:	最高学历: Highest Educational Qualification:	
婚姻状况: 未婚 / 已婚 Marital Status: Single / Married	配偶姓名(英): Name of Spouse:	有意申请小一 2B 报名阶段的推荐: Intent to apply for Phase 2B recommendation: <input type="checkbox"/> 否 No <input type="checkbox"/> 是 Yes, 报名年份 Year of Registration: _____	

联络资料 CONTACT INFORMATION

主要电邮: Primary Email Address:	手机: H/P:	电话(家): Tel (H):
第二电邮: Secondary Email Address:	<input type="checkbox"/> 本人同意不接收福建会馆会讯以及其他通讯资料的印刷版本。I wish to opt out of receiving printed copies of the SHHK newsletter and correspondences from SHHK.	
住家地址: Residential Address:	邮区: Postal Code:	
邮寄地址: Mailing Address: (if different from above)	<input type="radio"/> 办公室 Office: <input type="radio"/> 其他 Others:	邮区: Postal Code:

就业资料 EMPLOYMENT INFORMATION

职业 / 职衔: Occupation / Designation:	任职机构: Name of Employer:	专业领域: Industry:
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义务服务 VOLUNTEER SERVICE

申请前请预先浏览福建会馆官网的会员义工计划和小一 2B 阶段报名的常见问题。Please access the FAQ on "Becoming A Volunteer" & FAQ for Phase 2B registration posted on SHHK website before signing up as volunteer.

本人有意申请成为福建会馆的义工。
I would like to sign up as a volunteer with SHHK.

其他资料 OTHER INFORMATION

参加其他社团 Involvement in other community organizations: 是 Yes
社团 Organization:
职位 Position Held: 从 Since:

介绍人(必须是本会会员) SPONSORS (must be existing members of Singapore Hokkien Huay Kuan)

本人确认我认识申请人, 并相信申请人如果被接纳为会员将会维护会馆的良好声誉及以会馆的利益为考量。
I confirm I know the Applicant and believe the Applicant, if admitted as a member, will uphold the good reputation and act in the interest of the Singapore Hokkien Huay Kuan.

签名 Signature: _____
介绍人姓名 Name of Sponsor:
会员号码 Membership No. (UMI):

签名 Signature: _____
介绍人姓名 Name of Sponsor:
会员号码 Membership No. (UMI):

