



SINGAPORE KHALSA ASSOCIATION

2 Tessensohn Road, Singapore 217646.
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 membership@singaporekhalsa.org.sg
 www.singaporekhalsa.org.sg

Affix a recent passport photo

SILVER MEMBERSHIP APPLICATION

Membership Category (please tick accordingly)

Silver Life Silver Associate Life

Personal Particulars			
Full Name (as per PP/NRIC)			Preferred Name on Card (20 characters maximum)
NRIC No / Fin No	Last 4 digits		Date of Birth: (DD-MM-YYYY)
Nationality	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status* (Delete accordingly) Single / Married / Widower / Others	
Residence Status* (Delete accordingly)	Singaporean / PR / EP / DP/ Others	Race	Religion
Residence / Mailing Address			
Address Line 1			
Address Line 2			
Country		Postal Code	
Contact Information			
Mobile No		Home No	
Email Address		Office No	
Employment			
Occupation		Organisation	
Activities			
Please indicate which of the following games / activities interest you:			
<input type="checkbox"/> Hockey <input type="checkbox"/> Football <input type="checkbox"/> Netball <input type="checkbox"/> Badminton <input type="checkbox"/> Pool <input type="checkbox"/> Floorball		<input type="checkbox"/> Cricket <input type="checkbox"/> Golf <input type="checkbox"/> Social and Cultural Activities <input type="checkbox"/> Networking <input type="checkbox"/> Seminars and Intellectual Development <input type="checkbox"/> Others (Please Specify): _____	
Have you at any time been expelled/suspended from SKA or any other organisation?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of any criminal offence?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been adjudicated a bankrupt?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If 'Yes', please provide more details _____			

Membership Type	Fees* (excluding GST)	Remarks
Silver Life (for Sikhs Only)	\$250** one-time	**Payment by installation is available, please refer to the SKA office.
Silver Associate Life	\$500** one-time	GST is payable for all membership fees.

Terms & Conditions

- The 'Silver Life' and 'Silver Associate Life' memberships are open to new members aged 55 years and above
- The 'Silver Life' membership is for individuals who meet the eligibility of a 'Life' member as per SKA Rules and Regulations and 'Silver Associate Life' membership is for other individuals.
- All membership applications are to be approved by the Association's Management Committee, which reserves the right to reject any application without having to provide any reasons for its decision.
- For details on the members' rights and the Rules and Regulations of the Association, please refer to <https://singaporekhalsa.org.sg>.
- 'Silver Life' and 'Silver Associate Life' members will not have any voting rights and nor be eligible to be appointed to the SKA Management Committee.
- The 'Silver Life' and 'Silver Associate Life' memberships are not transferable.
- All membership fees, including partial installments, paid are non-refundable.

Marketing Information

Please tick the relevant boxes below if you are agreeable to receiving the following marketing materials:

- I do not wish to receive any marketing information.
- I would like to receive information including but not limited to offers, promotions and information via the following channels:
- Newsletter Email SMS WhatsApp

	PROPOSER	SECONDER
Name		
Membership No		
Signature		
Date		
NB. The Proposer and Seconder must be 'Life' and 'Associate Life' members of Singapore Khalsa Association.		

DECLARATION

- I hereby declare that all information given in this application form is true to the best of my knowledge.
- I understand and agree that any false information given will disqualify my application.
- Should my membership be approved, I agree to comply with the Rules and Regulations and By-Laws of the Association, as the same may from time to time be amended.
- I acknowledge that I have read and understood SKA's Data Protection Notice posted on www.singaporekhalsa.org.sg and consent to the collection, use and disclosure of my personal data by the Association for the purposes set out in the said Notice.

Application Name

Signature & Date

FOR OFFICIAL USE

APPLICATION VERIFICATION		SKA MANAGEMENT COMMITTEE	
Payment Date		Management Committee Mtg Date	
Payment Receipt No		Approval	YES or NO
Manager / Secretary		President / Secretary	
Date		Date	

