

Singapore Chefs' Association Member of World Association of Chefs Societies

Membership 2017

	New Application		Singapore Pastry Allaince Application	Change of Address
Please print in capital letters.		MEMBERSHIP NO	:	
TITLE: Miss Mrs.	Mr. Others			
FULL NAME:				
DATE OF BIRTH: Day	Month	Year COUN	TRY OF BIRTH:	
NATIONALITY:				
RESIDENTIAL ADDRESS:				
BLOCK:	UNIT:			
ROAD:				
POSTAL CODE:	SING	GAPORE /OTHERS		
RESIDENT PHONE: MO	OBILE NO: PERS	SONAL EMAIL:		
NAME & ADDRESS OF EMPLOYER / CO	DMPANY:			
OFFICE PHONE:	OFFI	CE EMAIL:		
Cheque For: \$\$50.00	SINGAPORE JUNIOR CHEF CL	LUB (25 YEARS OLD & BELO	OW - STUDENT IN THE CUI	INARY SCHOOL)
\$\$100.00	JUNIOR CHEF (BELOW CHEF	DE PARTIE)		
\$\$150.00	ACTIVE MEMBER (CHEF DE	PARTIE AND ABOVE)		
S\$2000.00 Corporate Member - Please Fill Up the	CORPORATE MEMBER			
Cheque Payment To: Singapore Chefs				
Cheque No:	Bank:		Amount: S\$	
I hereby apply for active membership	and declare that the information give	n in this application is cor	rect.	
Signature:				
MAIL TO: THE SECRETARIAT SINGAP	ORE CHEFS' ASSOCIATION			
RAFFLES CITY P.O. BOX 92 SINGAPORE 911731	6			
FOR OFFICIAL USE ONLY: MEMBERS	SHIP NUMBER:	BY HAND	ВУ РО	ST
Date Received CHEQUE NO:	OFFICIAL RECEIPT NO:	YEAR OF RENEWA	L REMARI	KS
			Cai	
			Cei	tificate