

**Membership Fee payment to be made only after you received notification of successful application.**

## Consent

I acknowledge that I have read and understood the Data Protection Notice at [sikhmissionary.org.sg](http://sikhmissionary.org.sg) and consent to the collection, use and disclosure of my personal data by the Society for the purposes set out in the Notice.

Please tick the appropriate boxes:

- ☐ I do not wish to receive any marketing information.
- ☐ I would like to receive information about the services which may be provided by the Society, including (but not limited to) offers, promotions and information about new services via the following channels:
- ☐ Newsletter    ☐ Email    ☐ Text message    ☐ Telephone call

## For applicants under the age of 18 years (\* Delete where applicable)

I, the parent/guardian\* of the applicant, am aware of my child's/ward's\* application for membership and hereby consent to my child/ ward\* being a member of the Society.

\_\_\_\_\_  
Name NRIC (last 4 digits) of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian and Date

<b>Proposer name:</b> _____	<b>Seconder name:</b> _____
<b>Membership No:</b> _____	<b>Membership No:</b> _____
<b>Signature:</b> _____	<b>Signature:</b> _____

FOR OFFICIAL USE	
<b>APPLICATION VERIFIED BY:</b>  Secretary: _____  Date : _____   Payment Receipt No: _____ Payment Via: _____	<b>MANAGEMENT COMMITTEE</b>  Tabled at the Management Committee Meeting held on _____  Approved / Not Approved: _____  Membership Number: _____  _____ President  _____ Date