



BEATTY ALUMNI

Membership Application Form

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I wish to be a *Life Member/Ordinary Member of Beatty Alumni, and agree to abide by the Constitution and Rules of the Alumni.

MY PERSONAL DATA

Full Name : *Mr / Mdm / Dr / Miss _____

NRIC Number : _____ Date of Birth: _____

Occupation : _____ Martial Status: *Married / Single

Name of Spouse : _____

Home Address : _____

Office Address : _____

Contact Numbers : Office: _____ Fax: _____

Home: _____ Handphone: _____

E-mail: _____

Year Left School : _____

Number of Children : 1) *M / F Age _____ 1) *M / F Age _____

2) *M / F Age _____ 2) *M / F Age _____

Interest / Hobbies : _____

I enclose herewith a crossed cheque of : \$100.00** Life Membership /

: \$20.00** Ordinary Membership (per annum)

Bank/Cheque No. _____ being subscription fees payable to '**Beatty Alumni**'.

Signature: _____

Date: _____

*Delete where inapplicable

**Tick where applicable