



Parkinson Society Singapore

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A Registered Charity with the National Council of Social Service UEN S96SS0203J

Parkinson Society Singapore
新加坡帕金森协会

MEMBERSHIP APPLICATION FORM NEW / RENEWAL * 新会员申请表格 / 更新表格 (*circle accordingly)

Date of Application 申请日期 :			
Name 姓名 *Prof/Dr/Mr/Mrs/Mdm/Ms:		Race 种族:	
NRIC No 身份证号码:		Date of Birth 出生日期 (dd/mm/yy):	
Occupation 职业:		Year of diagnosis 诊断年度:	
Address 住址:		Singapore 新加坡邮区:	
Visiting Doctor's Name & Clinic/Hospital 医生名字和诊所/医院名称:			
Tel 联络号码:	(Home 住宅)	Mobile 手机:	Email 电邮:
Person to contact in case of emergency 紧急联络人士 Name 姓名:		Relationship 关系:	Mobile 手机:

Please tick where appropriate 请在适当的空格内打勾 :			
I am 我是	<input type="checkbox"/> Person with Parkinson 帕金森人士	<input type="checkbox"/> Caregivers 看护者	
	<input type="checkbox"/> Healthcare Professional 医疗专业人士	<input type="checkbox"/> Others (specify) 其他(请注明)	
Membership Category 会员类别			
Ordinary Member (Calendar Year) 普通会员 <input type="checkbox"/> \$ 50		Senior Ordinary (Calendar Year) 乐龄普通会员 (aged 60 & above 60岁或以上) <input type="checkbox"/> \$ 30	
Newsletter / Flyer to be sent by <input type="checkbox"/> Post (寄邮) <input type="checkbox"/> Email (电邮)			

Name 姓名 & I/C No. 身份证号码: _____ Signature & Date 签名/日期: _____

Donation 捐款 (Optional 自选)

I would like to make a donation to the Society 我想为帕金森协会做出捐款,请注明捐款数额: \$ _____
(Donations \$50 and above are tax exempted 捐款数额\$50或以上将免税)

- No, I do not need a Tax Deductible Receipt. 我不需要免税收据。
- I would like my Tax Deductible Receipt to be issued to 请发免税收据给:

Payment Mode

Credit Card Payment (Visa/ Master Card only) No. 信用卡

Expiry Date 到期日

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Cheque Payment 支票 (Payable to "Parkinson Society Singapore" 请付予新加坡帕金森协会)

Bank / Cheque No. 支票号码 _____ Amount 数额: \$ _____

Cash 现金 Amount 数额: \$ _____

To be handed to PSS personally. Please do not send CASH through post. 请别邮寄现金, 亲手交至新加坡帕金森协会办公室。

By checking this box, i consent to the use of my personal data provided in this membership form by PSS for the specific purpose of sending me PSS announcements and any other communication on matters pertaining to PSS-related programmes, events and services.

Official use only 只有正式使用

Received Date 收到的日期: _____ Amount 数额: \$ _____ Receipt No. 收据号码: _____