

**CHRISTMAS MALAM JOLLY 2018  
21 DEC – 7PM @ CHINESE SWIMMING CLUB BALLROOM**

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|  | **MR/MS** | **Name of participant** | **MEMBER\*\*** | **NON MEMBER** |
|  |  | **(\*\*Members please refer to page 2 for update of personal details. Thank you.\*\*)** | **$78.00** | **$88.00** |
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Payment : S$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ payable to “**The Peranakan Association Singapore**”

Bank : \_\_\_\_\_\_\_\_\_\_\_\_ Cheque no : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_person (s).

**OR Via : INTERBANK TRANSFER : OCBC ACCOUNT : 501 – 030 – 159 – 001**

**Please attach proof of transfer with the application form.**

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For enquiries email to: events@peranakan.org.sg / mobile : 97266082 – Gwen Ong** [**treasurer@peranakan.org.sg**](mailto:treasurer@peranakan.org.sg) **– Bryan Tan**

**Please mail out payment & form by 07 DEC 2018 to:   
Raffles City PO Box 1640, Singapore 911755**

**Kindly do note all payment must be received prior to the event.**

**Tables will be allocated on a first come first serve basis.**

**No collection of payment at venue.**

**TPAS &/or Kinara, CSC will not be liable for any loss of personal property or any injury during the evening. Any incidents would be sole liability of the guest.**

**PDPA Consent Clause**

**By submitting this Form, you hereby agree that The Peranakan Association Singapore may collect, obtain, store and process your personal data that you have provided in this form for the purpose of facilitating registration and membership update.**

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| **OFFICAL USE :**  **TABLE NUMBER ALLOCATION : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE RECEIVED : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **REMARKS : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**MEMBERS UPDATE : TO ENSURE TIMELY DELIVERY OF TPAS MAGAZINE & TO BE KEPT INFORMED OF EVENTS**

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| **NAME** | **ADDRESS** | **TEL NO :** | **EMAIL** | **DATE OF**  **BIRTH** |
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