AFFILIATION MEMBERSHIP APPLICATION FORM

INDIVIDUAL ASSOCIATE MEMBERSHIP

*Tick box where applicable	□ New Application	□ Renewal	
Name:			
Mailing Address:		Postal Code:	
Telephone:	Email Address: _		
IMPORTANT: 1. Only completed and duly sig 2. Application will be subjected 3. SCF reserves the right to re	to approval from Singapore Ca	()	

I declare that the information provided in this application form is true and correct and I authorise the SCF to verify the information provided with any source(s) it deems fit.

Name

Signature

Date



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PAYMENT

- 1. The annual subscription for individual associate members shall be **\$\$300.00** per year.
- 2. There shall be an one-time application fee of **\$\$50.00** for all new applications.
- 3. Please see below for payment option.

By Bank Transfer/PayNow

Singapore Canoe Federation

DBS Current Account Account number: 001-038371-0 Branch code: 7171 Branch number: 001

PayNow/UEN no. S71SS0035C

Email to: finance@scf.org.sg

Please send a screenshot/bank slip and indicate your transfer date and amount.

FOR OFFICIAL USE

Date Received:	□ Approved □ Not Approved	Processed By:
Receipt No.:	Approved By:	Date Processed:
	Approval Date:	Membership No.: