



# TAMILS REPRESENTATIVE COUNCIL

101 Balestier Road Singapore 329678

Tel: 6336 6316 Fax: 6299 9487

## Application for Individual Membership



Type of Membership Subscription :

Personal Particulars

Name:	Name as in NRIC :	
Date of birth :	Nationality : Singaporean / Permanent Resident	Gender :
Occupation :	Marital Status :	

Residential Address :

Pincode :	Home Telephone :	Handphone :
Office :	Email Address :	

Particulars of Proposer & Seconder (must be a Life / Ordinary Member)

<b>Proposer</b> Name: NRIC :	<b>Seconder</b> Name: NRIC :
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For Official Use Only

Received Cash/Cheque No	for S\$	On
	ReceiptNo	Date :

Approved/Not Approved by Management Committee

President Signature	Date
Notified Applicant on	Membership No