THE SINGAPORE POLICE CO-OPERATIVE SOCIETY LTD
UEN No: S26CS0004D | GST Registration No. M90369498G
250 Sims Avenue #04-01 SPCS Building Singapore 387513
Tel: 63348055 | Fax: 63348497 | Phone Banking: 63345670
Website: www.policecoop.org.sg | Email: enquiry@policecoop.org.sg

APPLICATION FOR MEMBERSHIP (ORDINARY)

PERSONAL PARTICULARS (PLEASE WRITE IN BLOCK LETTERS)

FULL NAME (As in NRIC)		PERSONNEL NO.
NRIC / FIN NO.	**DATE OF BIRTH (dd/mm/yyyy)**	**GENDER**
(S / T / F / G)* -	/ /	
NATIONALITY	**RACE**	**MARITAL STATUS**
HOME (CONTACT NO.)	**OFFICE (CONTACT NO.)**	**MOBILE (CONTACT NO.)**

HOME ADDRESS (As in NRIC)

MAILING ADDRESS (If different from above)

EMAIL

NAME OF BANK / BRANCH	ACCOUNT NO.

CURRENT EMPLOYMENT DETAILS

NAME OF EMPLOYER		
DIV / UNIT	**RANK & SVC NUMBER / EMPLOYEE CODE**	**DATE OF EMPLOYMENT (dd/mm/yyyy)**
		/ /
GROSS MONTHLY SALARY: $	**EMPLOYMENT TYPE**	

CONTRIBUTIONS TO SAVINGS

Compulsory Monthly Contribution: Subscription (Minimum $40.00, Maximum $200.00)	Optional Monthly Contribution: Specific Deposit (Minimum $10.00, Half-yearly Interest)
$	$
Compulsory Contribution (Once Only Deduction)	**Share Certificate No. (For Official Use Only)**
150 Share Capital @ $1.00/Share $150.00 Entrance Fee $ 10.00	

** Please circle where applicable.*

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I hereby enclose the following documents for the processing of my application. (Please tick below.)

☐A copy of my NRIC (front and back);
☐A copy of my latest payslip;
☐A copy of my bank book/statement - front page with my name and account number (preferably POSB/DBS Bank Account);
☐A copy of the completed Individual Tax Residency Self-Certification Form; and
☐A copy of your employment contract, if applicable.

I declare that:

(a) I am 16 years of age or above;
(b) I am a citizen of Singapore or resident in Singapore;
(c) I am not an undischarged bankrupt; and
(d) I am not convicted of an offence punishable with imprisonment.

I understand that this application is subject to acceptance by the Society. The Society reserves the right to decline my application without assigning any reason thereof.

I agree to abide by the Co-operative Societies Act, Rules and By-Laws of the Co-operative.

I authorise my employer to deduct all my dues and credit them to the Co-operative.

I have read and understood the Co-operative's Privacy Statement. I hereby consent to the Co-operative collecting, using and disclosing my personal data for the purposes set out therein, in particular, to the disclosure of my personal data in accordance with the Personal Data Protection Act.

APPLICANT'S SIGNATURE

DATE (dd/mm/yyyy) __ __ / __ __ / __ __ __ __

PROPOSER

FULL NAME (As in NRIC):

NRIC / FIN NO.:	**DIV / UNIT:**
(S / T / F / G)* __ __ __ __ __ __ __ - __	

PROPOSER'S SIGNATURE

DATE (dd/mm/yyyy) __ __ / __ __ / __ __ __ __

Privacy Statement may be downloaded from www.policecoop.org.sg

FOR OFFICIAL USE ONLY			
	INPUT BY		**CHECKED BY**
Rubber Stamp & Signature		Rubber Stamp & Signature	
Date		Date	
	SCANNED BY	**REMARKS**	
Rubber Stamp & Signature			
Date			