



## Diabetic Society of Singapore Membership Application

Name: (Dr/Mr/Mrs/Mdm/Miss) \_\_\_\_\_

NRIC No.: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Occupation: \_\_\_\_\_ Sex: M / F

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

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Language Spoken: \_\_\_\_\_

Contact: \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_ (HP)

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

Diabetic  / Non-Diabetic  First Diagnosed in \_\_\_\_\_

Current Treatment \_\_\_\_\_

Self Glucose Monitoring (Type of Meter \_\_\_\_\_ )

### Membership Fees

Ordinary Member	Life Member	Associate Member
<input type="checkbox"/> \$20 (Jan to Dec)	<input type="checkbox"/> \$200	<input type="checkbox"/> \$10
<input type="checkbox"/> \$10 (Jul to Dec)		
<input type="checkbox"/> \$55 (3 years)		
<input type="checkbox"/> \$90 (5 years)		

### Entrance Fee

\$15 (Ordinary / Life Membership)

Amount S\$ \_\_\_\_\_ (Cheque/Cash) Bank/Cheque No.: \_\_\_\_\_

(Cheque payable to "Diabetic Society of Singapore")

[Send to: Blk 141 Bedok Reservoir Road, #01-1529, Singapore 470141]

Signature \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICIAL USE

Membership No.: \_\_\_\_\_ Centre: \_\_\_\_\_

Receipt No.: \_\_\_\_\_ Date Received: \_\_\_\_\_