



Renewal of Membership 2019

(Please tick the appropriate box)

Renewal for: Professional Membership Associate Membership

Note:

- Validity of Membership is from 1 January to 31 December 2019
Please complete the form in full and submit to SISO at the above address
Payment of \$85.60 for membership fee should accompany this application. For cheque, it is to be made payable to SISO
Alternatively, you can made payment via PayNow - UEN S75SS0006D or Internet Banking DBS Acc no. 070-002357-1
Please email the payment receipt to SISO for payment through PayNow & Internet Banking.
All information given will be treated as private and confidential under the Personal Data Protection Act (PDPA 2012)

PERSONAL PARTICULARS (IN BLOCK LETTERS)

Form fields for personal particulars including Name, Date of Birth, Phone, Residential Address, Postal Code, Nationality, Country of Birth, Sex, Marital Status, Personal E-mail, WSHO Registration No., and Renewal for the year (2019).

EMPLOYMENT INFORMATION

Form fields for employment information including Current Employer, Employer Address, Postal Code, Office Phone, Office E-mail, Fax, Industry, Years in Industry, Applicant's Job Title, Date Joined, Reporting to Name, and Job Title.

INTERESTS

Please select your interests

- Conferences, seminars and workshops
Courses related to WSH
Members' networking sessions
Other courses (Please indicate: )
SISO merchandise
SISO quarterly magazine (Safety Matters) \*Please circle if you would like the softcopy / hardcopy version

DECLARATION

I wish to renew my membership as Professional / Associate Member of the Singapore Institution of Safety Officers and confirm that all the information given above is correct.

Signature of Applicant

Date

**Application verified and recommended for the Executive Committee's approval**

Cash OR/Cheque No. : \_\_\_\_\_

For the year:

**2019**

For the total amount of : \_\_\_\_\_

**Remarks**

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