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The Management Committee  
Society of Singapore Golfers  
69 Ubi Road 1  
#08-25 Oxley Bizhub  
Singapore 408731  
Tel: 6702-5045  
Fax: 6702-7728

Dear Sir,

**EXTENDED FAMILY SCHEME**

I have read and agreed to comply with all the Rules and Regulations governing the Extended Family Scheme and hereby would like to enroll my child under the aforesaid Scheme. His/her particulars are stated below. A copy of the birth certificate is also attached for your verification.

|                 |             |
|-----------------|-------------|
| Name            |             |
| Gender          |             |
| BC / NRIC No    |             |
| Date of Birth   |             |
| Amount & Chq No | \$50.00 ( ) |

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Name of Applicant**

\_\_\_\_\_  
**Mship No**

\_\_\_\_\_  
**Date of Application**