The Management Committee Society of Singapore Golfers 69 Ubi Road 1, #10-26 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 enrol my child under the aforesaid Scheme and certify that his/her particulars as stated below are true and correct.

Name (as appeared in Birth Certificate)		
Gender		
Date of Birth		
Amount & Cheque Number	\$50.00 (Chq No:)

Signature of Applicant

Name of Applicant

SSG Membership Number

Date of Application