



A Branch of SAFRA  
Sharing Experiences, Inspiring Generations

## MEMBERSHIP APPLICATION FORM

APPLICANT'S PERSONAL DATA		*Please circle accordingly
Full name as in NRIC ( <i>Please underline surname</i> ) : *MR / MDM / MS		NRIC: (Last 4 Characters Only) e.g 123A
Home Address:		Date of Birth:
Tel (H):	Tel (HP):	Sex: * M / F
Email Address:		Marital Status: * S / M
SERVICE INFORMATION		
Service: * Army / Air Force / Navy / Others (MINDEF/Joint)		Last Rank/Grade Held:
<b>DOCUMENTARY PROOF *</b> Please attach a photocopy of documentary proof of length of service, or pension slip or any other proof.		
SAFVL MEMBER REFEREE		
Name of Referee:		Tel (HP):
Name of Referee:		Tel (HP):
MEMBERSHIP FEES ( <i>Please see Membership Terms &amp; Conditions on pg 2</i> )		
Are you a SAFRA member? *Y / N. If YES, SAFRA Membership Card Expiry Date: _____		
The Fees Structure is as follows:		
Members who are below 70 years old:		
<b>2 Years</b>	<b>5 years</b>	<b>10 years</b>
\$120	\$232	\$405
Members who are above 70 years old:		
<b>2 Years</b>	<b>5 years</b>	<b>10 years</b>
\$60	\$116	\$202
<ul style="list-style-type: none"> <li>• Membership expiry date is as per the month joining.</li> <li>• <b>1<sup>st</sup> Application is for a minimum period of 2 years.</b></li> <li>• Separate charges apply for interest clubs' memberships and use of selected facilities/activities.</li> </ul>		
MODE OF PAYMENT ( <i>Please tick</i> )		
<input type="checkbox"/> Cheque payment for \$_____ (Cheque No. _____) <b>made payable to SAFRA</b> <i>(Please indicate name &amp; NRIC on the reverse side of the cheque)</i> Mailing Address: SAF Veterans' League, c/o SAFRA, 293, Lorong 6, Toa Payoh, S(319387)		
<input type="checkbox"/> <b>Cash – to be made in person at SAFRA Clubhouse</b> <b>(Please contact SAFVL Secretariat at Tel: 6355-4507 for arrangement)</b>		

**DECLARATION**

I declare that the particulars given above are correct and I agree to abide by the rules and regulations of SAFVL/SAFRA. I also give consent to the use of my personal details for SAFVL membership application administrative use.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*If paying by cheque, please remember to enclose the cheque*

<b>FOR OFFICIAL USE ONLY - CSA / MEMBERSHIP DEPT</b>		
<i>(To complete Section below)</i>		
Date Processed:	Amt Paid:	* Mode: Cheque / Cash / NETS
Receipt No:	Date Issued:	Action By:

**SAF VETERANS' LEAGUE (SAFVL) MEMBERSHIP**

The SAFVL is a Branch of SAFRA. All members of the SAFVL shall be Associate Members of SAFRA.

**TERMS AND CONDITIONS**

1. Application Form must be duly completed. Membership is subject to approval by SAFVL and SAFRA Management Committees.
2. Upon successful application, all membership subscription fees are non-refundable, regardless of resignation or termination. Advanced payment made is non-refundable for unused years of subscription.
3. To terminate membership, the member must submit in writing his/her intention.
4. A member found to have misled the League/Association will have his/her membership revoked.
5. Members must notify the SAFVL of any change in mailing address and other personal particulars in writing via letter or email.
6. SAFVL/SAFRA reserves the right to amend any Terms & Conditions without prior notice.
7. Your SAFVL membership will be terminated if outstanding payment is not received and all earlier subscription fees received will not be refunded.

**SAF Veterans' League**

**c/o SAFRA National Service Association, 293, Lorong 6, Toa Payoh, SINGAPORE 319387,**

**Tel: 6355-4507, Fax: 6355-4527**

WEBSITE: <https://www.safra.sg/interest-groups/saf-veterans'-league>



<https://www.facebook.com/SAFVLVeterans>



<https://www.instagram.com/safvlveterans/>