

**CORPORATE MEMBERSHIP APPLICATION FORM**

Please read the section on Membership Information carefully before completing the form.

**1. CORPORATE MEMBERSHIP APPLICANT'S PARTICULARS**

Company Name: \_\_\_\_\_ Unique Entity Number (UEN): \_\_\_\_\_  
 Company Address: \_\_\_\_\_ Contact Person : \_\_\_\_\_  
 \_\_\_\_\_ Postal Code: \_\_\_\_\_ Contact Person Designation: [ VP ] [ CEO ] [ Director ] [ HR Manager ]  
 [ Others: \_\_\_\_\_ ]  
 Company Email: \_\_\_\_\_ Contact Person Email: \_\_\_\_\_  
 Company Tel. No: \_\_\_\_\_ Contact Person Tel. No: \_\_\_\_\_  
 Type of Business: \_\_\_\_\_

**2. NOMINEE(S)' PARTICULARS**

(Each corporate company can nominate up to three (3) nominees)

**i) NOMINEE 1**

Membership ID:

[ Mr ] [ Mrs ] [ Ms ] [ Mdm ] [ Dr ] [ Prof ] [ Assoc. Prof ] [ Others: \_\_\_\_\_ ]

(for official use only)

Full name as in NRIC/Passport: (Underline Surname) \_\_\_\_\_

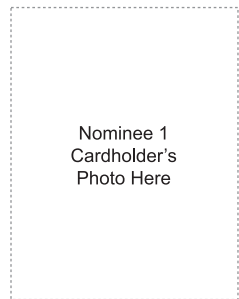
Preferred Name on Card: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: [ Male / Female ] Race: \_\_\_\_\_

Position / Job Title: \_\_\_\_\_

Marital Status: [ Single ] [ Married ] [ Others ]



	Name of University	Degree	Year of Graduation
1.			
2.			
3.			

Residential Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Other Address (if any): \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (M)

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

Preferred Mailing Address: [ ] Residential [ ] Office [ ] Other Preferred Billing Address: [ ] Residential [ ] Office [ ] Others

**SPOUSE'S PARTICULARS**

Would you like to apply for Spouse Membership at additional \$10\* per month? [ ] Yes [ ] No

[ Mr ] [ Mrs ] [ Ms ] [ Mdm ] [ Dr ] [ Prof ] [ Assoc. Prof ] [ Others: \_\_\_\_\_ ]

Full name as in NRIC/Passport: (Underline Surname) \_\_\_\_\_

Preferred Name on Card: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: [ Male / Female ] Race: \_\_\_\_\_

Highest Education Attained: \_\_\_\_\_

Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (M)

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



Company Name (if any): \_\_\_\_\_

Position/Job Title: \_\_\_\_\_ Type of Business: \_\_\_\_\_

**CHILD(REN) PARTICULARS**

Would you like to apply for junior Membership?  Yes  No

Category A1 (12 - 15 years old): Add on \$5\*/mth

Category A2 (16 - 25 years old): Add on \$10\*/mth

**CHILD 1**

Child's Name: \_\_\_\_\_

Child Gender: [ Male / Female ]

Preferred Name on Card: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NRIC/Passport No. (Last 4 characters): \_\_\_\_ \_

Contact No: \_\_\_\_\_ (M)

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

Race: \_\_\_\_\_

Nationality: \_\_\_\_\_



**CHILD 2**

Child's Name: \_\_\_\_\_

Child Gender: [ Male / Female ]

Preferred Name on Card: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NRIC/Passport No. (Last 4 characters): \_\_\_\_ \_

Contact No: \_\_\_\_\_ (M)

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

Race: \_\_\_\_\_

Nationality: \_\_\_\_\_



**Cultural:**

Choir  DanceSport  DramaWorks  Music

**Sports & Recreation:**

Badminton  Balut  Billiards  Bowling  Bridge  
 Cycling  Darts  Golf  Pickleball  Soccer  
 Social Mahjong  Squash  Table Tennis  Tennis

**Interest:**

Business Connect  Chess  Scuba Diving  NUSS Toastmasters Club

**ii) NOMINEE 2**

[ Mr ] [ Mrs ] [ Ms ] [ Mdm ] [ Dr ] [ Prof ] [ Assoc. Prof ] [ Others: \_\_\_\_\_ ]

Membership ID:

Full name as in NRIC/Passport: (Underline Surname) \_\_\_\_\_ (for official use only)

Preferred Name on Card: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: [ Male / Female ] Race: \_\_\_\_\_

Position / Job Title: \_\_\_\_\_

Marital Status: [ Single ] [ Married ] [ Others ]



	Name of University	Degree	Year of Graduation
1.			
2.			
3.			

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

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

Other Address (if any): \_\_\_\_\_

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

Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (M)

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

Preferred Mailing Address: [ ] Residential [ ] Office [ ] Other Preferred Billing Address: [ ] Residential [ ] Office [ ] Others

**SPOUSE'S PARTICULARS**

Would you like to apply for Spouse Membership at \$10\* per month? [ ] Yes [ ] No

[ Mr ] [ Mrs ] [ Ms ] [ Mdm ] [ Dr ] [ Prof ] [ Assoc. Prof ] [ Others: \_\_\_\_\_ ]

Full name as in NRIC/Passport: (Underline Surname) \_\_\_\_\_

Preferred Name on Card: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: [ Male / Female ] Race: \_\_\_\_\_

Highest Education Attained: \_\_\_\_\_

Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (M)

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

Company Name (if any): \_\_\_\_\_

Position/Job Title: \_\_\_\_\_ Type of Business: \_\_\_\_\_



**CHILD(REN) PARTICULARS**

Would you like to apply for junior Membership? [ ] Yes [ ] No

Category A1 (12 - 15 years old): Add on \$5\*/mth

Category A2 (16 - 25 years old): Add on \$10\*/mth

**CHILD 1**

Child's Name: \_\_\_\_\_

Child Gender: [ Male / Female ]

Preferred Name on Card: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NRIC/Passport No. (Last 4 characters): \_\_\_\_ \_ \_ \_

Contact No: \_\_\_\_\_ (M)

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

Race: \_\_\_\_\_

Nationality: \_\_\_\_\_



**CHILD 2**

Child's Name: \_\_\_\_\_

Child Gender: [ Male / Female ]

Preferred Name on Card: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NRIC/Passport No. (Last 4 characters): \_\_\_\_ \_ \_ \_

Contact No: \_\_\_\_\_ (M)

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

Race: \_\_\_\_\_

Nationality: \_\_\_\_\_



**Cultural:**

[ ] Choir [ ] DanceSport [ ] DramaWorks [ ] Music

**Sports & Recreation:**

[ ] Badminton [ ] Balut [ ] Billiards [ ] Bowling [ ] Bridge  
[ ] Cycling [ ] Darts [ ] Golf [ ] Pickleball [ ] Soccer  
[ ] Social Mahjong [ ] Squash [ ] Table Tennis [ ] Tennis

**Interest:**

[ ] Business Connect [ ] Chess [ ] Scuba Diving [ ] NUSS Toastmasters Club

**iii) NOMINEE 3**

[ Mr ] [ Mrs ] [ Ms ] [ Mdm ] [ Dr ] [ Prof ] [ Assoc. Prof ] [ Others: \_\_\_\_\_ ]

Membership ID:

Full name as in NRIC/Passport: (Underline Surname) \_\_\_\_\_

(for official use only)

Preferred Name on Card: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: [ Male / Female ] Race: \_\_\_\_\_

Position / Job Title: \_\_\_\_\_

Marital Status: [ Single ] [ Married ] [ Others ]



	Name of University	Degree	Year of Graduation
1.			
2.			
3.			

Residential Address: \_\_\_\_\_  
 \_\_\_\_\_ Postal Code: \_\_\_\_\_

Other Address (if any): \_\_\_\_\_  
 \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (M)

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

Preferred Mailing Address: [ ] Residential [ ] Office [ ] Other Preferred Billing Address: [ ] Residential [ ] Office [ ] Others

**SPOUSE'S PARTICULARS**

Would you like to apply for Spouse Membership at \$10\* per month? [ ] Yes [ ] No

[ Mr ] [ Mrs ] [ Ms ] [ Mdm ] [ Dr ] [ Prof ] [ Assoc. Prof ] [ Others: \_\_\_\_\_ ]

Full name as in NRIC/Passport: (Underline Surname) \_\_\_\_\_

Preferred Name on Card: \_\_\_\_\_

NRIC/Passport No: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: [ Male / Female ] Race: \_\_\_\_\_

Highest Education Attained: \_\_\_\_\_

Contact No: \_\_\_\_\_ (H) \_\_\_\_\_ (M)

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

Company Name (if any): \_\_\_\_\_

Position/Job Title: \_\_\_\_\_ Type of Business: \_\_\_\_\_



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Child's Name: \_\_\_\_\_

Child Gender: [ Male / Female ]

Preferred Name on Card: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NRIC/Passport No. (Last 4 characters): \_\_\_\_ \_

Contact No: \_\_\_\_\_ (M)

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

Race: \_\_\_\_\_

Nationality: \_\_\_\_\_



**CHILD 2**

Child's Name: \_\_\_\_\_

Child Gender: [ Male / Female ]

Preferred Name on Card: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NRIC/Passport No. (Last 4 characters): \_\_\_\_ \_

Contact No: \_\_\_\_\_ (M)

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

Race: \_\_\_\_\_

Nationality: \_\_\_\_\_



**Cultural:**

[ ] Choir [ ] DanceSport [ ] DramaWorks [ ] Music

**Sports & Recreation:**

[ ] Badminton [ ] Balut [ ] Billiards [ ] Bowling [ ] Bridge  
 [ ] Cycling [ ] Darts [ ] Golf [ ] Pickleball [ ] Soccer  
 [ ] Social Mahjong [ ] Squash [ ] Table Tennis [ ] Tennis

**Interest:**

[ ] Business Connect [ ] Chess [ ] Scuba Diving [ ] NUSS Toastmasters Club

## MEMBERSHIP INFORMATION

### 1. Eligibility

- a. Nominee(s) must be under the employment of the same Corporation and are graduates of recognised local and foreign universities.
- b. Spouse(s) of nominee(s) may apply for Spouse Membership. (Note: A Spouse Member is not entitled to any of the rights and privileges of members except those approved by the Management Committee.)
- c. Admission to NUSS is at the sole discretion of the Management Committee.
- d. Membership will be registered in the name of the Corporation.

### 2. Entrance Fee

- a. The current entrance fee for Corporate Membership is at \$12,000\* for up to three (3) nominees.
- b. Each Corporation is allowed to have a maximum of three (3) nominees.

### 3. Monthly Subscription Fee

The monthly subscription fee is \$100\* and \$10\* monthly for Spouse Members. The monthly subscription fee billing commences once the application is approved by the Management Committee.

### 4. Transfer Fees

- a. **Change of nominee** An admin fee of \$200\* applies for each change of nominee.
- b. **Transfer to another Corporation** A transfer fee of \$6,000\* applies for a Corporate Membership transfer. All nominee account(s) will cease after the transfer.

### 5. Credit Deposit

A credit deposit of \$100 applies for each nominee that is refundable to the Corporation upon the resignation of membership for the nominee account.

### 6. Documents to accompany Application Form

To expedite processing, please complete the Membership Application Form overleaf in full with the following documents:

#### Each nominee

- a. A copy of university degree;
- b. Our team will contact you to arrange for the sighting of your NRIC/passport;
- c. Entrance fee payment receipt;
- d. One (1) recent passport-sized colour photograph (soft copy acceptable).
- e. If applying for Spouse Membership, one (1) recent passport-sized colour photograph (soft copy acceptable).  
For verification purpose, we will also arrange for the sighting of your spouse's NRIC/Passport & Marriage Certificate for proof of relationship between the main member and spouse applicant.

#### Payment

Full payment (NETS/Cash/Credit Card/Cheque payable to "NUSS" in full) of:

- a. \$12,000\* + \$100 [credit deposit] for each nominee.

### 7. Notes for New Members

- a. The GST on the entrance fee is payable in full upon application and is non-refundable.
- b. Please allow 21 working days for processing.
- c. NUSS reserves the rights to withdraw or amend any promotions without prior notice.

*Incomplete documents will not be processed.*

*\*subject to prevailing GST*

*Terms and conditions is correct at the time of print. (September 2024)*

**DECLARATION BY APPLICANT & NOMINEE(S)**

- I, the applicant / nominee(s), hereby understand the above listed and declare that the particulars in this application form are correct.
- I, the applicant, understand that upon admission as a member, the entrance fee is non-refundable. The balance of the entrance fee, if any, becomes due and payable immediately in the event of resignation or expulsion from the Society.
- I, the applicant, understand that I am responsible for the conduct and behaviour of my nominee(s) and be liable for the payment of all entrance fees, subscription fees, transfer fees if applicable, and any other monies due on the accounts of its nominee(s) and in respect of its membership. Any amount owing arising from resignation or membership transfer will be made payable via cheque to the Corporation.
- I, the applicant / nominee(s), agree to comply with and be bound by the Constitution, Rules and Regulations of the Society, as may from time to time be in force.
- I, the applicant / nominee(s), agree to receive emails on all publicity from the Society and may choose to unsubscribe upon receipt of such emails.

.....  
Applicant's Name / Signature / Date:  
Designation: .....

.....  
Company's Stamp:

.....  
Nominee 1's Name / Signature / Date:  
Designation: .....

.....  
Spouse's Name / Signature / Date:  
(If applying for Spouse Membership)

.....  
Nominee 2's Name / Signature / Date:  
Designation: .....

.....  
Spouse's Name / Signature / Date:  
(If applying for Spouse Membership)

.....  
Nominee 3's Name / Signature / Date:  
Designation: .....

.....  
Spouse's Name / Signature / Date:  
(If applying for Spouse Membership)

<b>FOR OFFICIAL USE</b>		
Membership Salesperson :	Signature:	Date: