



For official use only  
Membership number: \_\_\_\_\_

## Membership Application Form

Please check  Mr  Ms  Dr

NEW  RENEWAL

Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

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

Company/Institution \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Tel No: \_\_\_\_\_ Email address \_\_\_\_\_

FIN/NRIC No. \_\_\_\_\_

Mailing address (if different from the company/institution address):

\_\_\_\_\_  
\_\_\_\_\_

### Membership Category

Full Membership (S\$ 50.00)

Corporate Membership\* (S\$ 250.00)

Associate Membership (S\$ 10.00)

\* **Corporate members** are entitled to nominate five (5) employees for SALAS membership. Please submit a separate form for each nominee.

### Sponsorship (not required for renewal of membership)

All new applicants must be sponsored by one current Full Member of SALAS.

Sponsor's Name \_\_\_\_\_ Membership Number \_\_\_\_\_

Sponsor's signature \_\_\_\_\_ Date \_\_\_\_\_

**I hereby apply for membership to the Singapore Association for Laboratory Animal Science.**

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

**Method of Payment:**  Cheque  Cash Amount enclosed S\$ \_\_\_\_\_

• Make cheque payable to **Singapore Association for Laboratory Animal Science** and write the applicant's name, address & membership category on the reverse.

• Payment must be in **Singapore Dollar** and must accompany the Membership Application Form.

• Mail completed Membership Application Form to:

**Singapore Association for Laboratory Animal Science**  
Ghim Moh Estate Post Office, P.O. Box 047, Singapore 912732

• A receipt will be sent to the mailing address provided by the applicant.