



TGC MEMBERS' DAY 2011
Saturday, 28 May 2011

REGISTRATION FORM

THE GRASSROOTS' CLUB

MEMBER'S DATA	
Member's Name	: Mr/Ms/Dr. _____
Address	: _____ Postal : _____
Email	: _____
Membership No.	: <small>(please select)</small> OR/AS/HO/FO _____ Expiry Date : _____
Contact No.	: Home : _____ Mobile : _____
I wish / do not wish to attend the Members' Day 2011 with my Family Member(s) and Guest(s)	
Please Select : Carnival (2pm-6pm) <input type="checkbox"/> Dinner (6pm-7pm) <input type="checkbox"/> Variety Show (7pm-10.00pm) <input type="checkbox"/>	
(If applicable): The following member(s) of my immediate family and/or guests will attend with me	
Family Member's Name	: _____ Membership No. <u>FM</u> _____ FOC
Family Member's Name	: _____ Membership No. <u>FM</u> _____ FOC
Family Member's Name	: _____ Membership No. <u>FM</u> _____ FOC
Family Member's Name	: _____ Membership No. <u>FM</u> _____ FOC
Guest's Name	: _____ NRIC No./PP _____ FOC
Additional 1 Guest only	: _____ NRIC No./PP _____ \$5.00
Member's Signature	: _____ Date : _____
FOR OFFICIAL USE	
Entitlement	Additional
1 Number of Game Coupons Issued <input type="checkbox"/>	5 Number of Game Coupons Issued <input type="checkbox"/>
2 Number of Snack Coupons Issued <input type="checkbox"/>	6 Number of Snack Coupons Issued <input type="checkbox"/>
3 Number of Dinner Coupons Issued <input type="checkbox"/>	7 Number of Dinner Coupons Issued <input type="checkbox"/>
4 Number of Lucky Draw Coupons Issued <input type="checkbox"/>	8 Number of Lucky Draw Coupons Issued <input type="checkbox"/>
Issuing Officer	
Name :	
Date Issue :	
Application Form Received on :	

Please submit your Registration Form by 13 May 2011 to The Grassroots' Club, 190 Ang Mo Kio Avenue 8, Singapore 568046. Fax : 65542348 or Email : services@grassrootsclub.org.sg