



**BE A SAFRA TRAVEL CLUB MEMBER TODAY AND GET  
PRIORITY ON TRAVEL BOOKINGS AND ENJOY GENUINE DISCOUNT!**

**PERSONAL PARTICULARS**

**NAME:** Mr/Mrs/Miss/Mdm \_\_\_\_\_ **NRIC NO:** \_\_\_\_\_

**SAFRA MEMBERSHIP TYPE:** \*Ordinary/Spouse/Associate/Life/Veteran **DATE OF BIRTH:** \_\_\_/\_\_\_/\_\_\_

**MARTIAL STATUS:** \*Single/Married **OCCUPATION:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CONTACT NO:** \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_ (Mobile)

**EMAIL ADDRESS:** \_\_\_\_\_

<b>SAFRA Travel Club Membership</b>	<b>2 years: \$ 10.00</b>
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**TERMS & CONDITIONS**

1. The Club is open to all valid SAFRA members.
2. All fees are non-refundable and payments by cheques should be crossed and made payable to **SAFRA**.
3. SAFRA shall be the sole interpreter of the Terms and Conditions laid and reserves the right to amend the Terms & Conditions without prior notice.

**DECLARATION**

1. I declare that the particulars stated herein are correct.
2. I agree to abide by the Terms & Conditions of the Club.
3. I agree that SAFRA and their appointed organising parties shall under no circumstances, accept liability for damages or loss during the Club's activities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please mail this application form together with payment to:  
SAFRA Travel Club, 2 Telok Blangah Way, Singapore 098803**

<u>For official use only</u>			
Amount collected: \$10.00/	Mode of payment	: CHQ/CSH/VISA/NETS	
Receipt No : _____	Source	: HQ/MF/TM/TP/STC/SYCC	
Date : _____	Servicing officer	: _____	
Remarks : _____			

For more information, please call us at 6377 9880.

\*Please delete accordingly.