

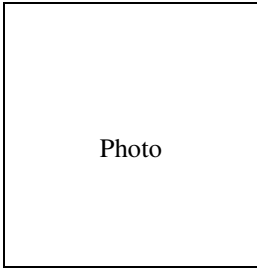


APPLICATION FORM

STUDENT MEMBER

MAILING LIST

AUDITION



I have read Sri Warisan's background, Objectives and Activities and hereby submit my application for the above.

If my application is approved, I will do my best to contribute towards the objectives of Sri Warisan

- Som Said Performing Arts Limited and will abide to the rules and regulations of the Company.

PERSONAL PARTICULARS

Name: _____ Date of Birth: _____

Gender: Male / Female I/C: _____ Marital Status : _____

Address: _____

_____ Singapore
(_____)

Level of Education / Occupation : _____

School / Company name:

Telephone: (Home) _____ (Office) _____ (Handphone)

E-mail:

Activities: () Dance () Music () Drama () Others:

Signature: _____

Date:

..... For Official Use

.....

Registration fee: _____ Receipt number: _____ Date:

Recommended by: _____ Approved by:

Remarks:

Nos 47 & 59 Kerbau Road. Singapore 219173 (Co. No. 199705768R)

Tel: 6225 6070 Fax: 6225 6036

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