

## Membership Renewal (May – April)

**Please make changes on this form and return with your membership fee  
Or log into “My Profile” at [www.snda.org.sg](http://www.snda.org.sg)**

Given Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Title (delete as appropriate): Ms. / Mrs. / Mr. / Dr. NRIC / Passport #: \_\_\_\_\_

Status (delete as appropriate): Full / Student / Affiliate Membership #: \_\_\_\_\_

If Student: Current class at TP or current year of study at Overseas Institution \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Home Fax: \_\_\_\_\_ Handphone: \_\_\_\_\_

Personal E-Mail: \_\_\_\_\_

Current Position Title & Dept: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

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

Company Phone: \_\_\_\_\_ Company Fax: \_\_\_\_\_ Pager: \_\_\_\_\_

Company E-Mail: \_\_\_\_\_

**Full Members** – Please delete as appropriate for each question below:

- |    |   |         |           |
|----|---|---------|-----------|
| 1. | Preferred E-mail for Correspondence:                                | Company | Personal  |
| 2. | Preferred Mailing Address:  | Company | Home      |
| 3. | Preferred address in SNDA Directory for Full Members once accepted: | Company | Home Both |

**Please note:** Where possible, correspondence will be communicated via E-Mail to members. Correspondence for Affiliate Members will be sent to company E-mail or address only. Correspondence for Student Members will be sent to home E-mail or address.

I have enclosed my crossed cheque made payable to “**Singapore Nutrition and Dietetics Association**” for Membership Renewal for May 06 to April 07 (check one):

S\$80 Full \_\_\_\_\_ S\$60 Affiliate \_\_\_\_\_ S\$20 Student \_\_\_\_\_

Cheque No: \_\_\_\_\_ Bank Name & Branch \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please send your cheque and completed form to:

**Membership Subcommittee  
SNDA  
Tanglin P.O. Box 180  
Singapore 912406**