

CORPORATE MEMBERSHIP APPLICATION FORM

Please read the section on Membership Information carefully before completing the form.

1. CORPORATE MEMBERSHIP APPLICANT'S PARTICULARS

Company Name: _____ Unique Entity Number (UEN): _____
 Company Address: _____ Contact Person : _____
 _____ Postal Code: _____ Contact Person Designation: [VP] [CEO] [Director] [HR Manager]
 [Others: _____]
 Company Email: _____ Contact Person Email: _____
 Company Tel. No: _____ Contact Person Tel. No: _____
 Type of Business: _____

2. NOMINEE(S)' PARTICULARS

(Each corporate company can nominate up to three (3) nominees)

i) NOMINEE 1

Membership ID:

[Mr] [Mrs] [Ms] [Mdm] [Dr] [Prof] [Assoc. Prof] [Others: _____]

(for official use only)

Full name as in NRIC/Passport: (Underline Surname) _____

Preferred Name on Card: _____

NRIC/Passport No: _____ Nationality: _____

Date of Birth: ____ / ____ / ____ Gender: [Male / Female] Race: _____

Position / Job Title: _____

Marital Status: [Single] [Married] [Others]



	Name of University	Degree	Year of Graduation
1.			
2.			
3.			

Residential Address: _____ Postal Code: _____

Other Address (if any): _____ Postal Code: _____

Contact No: _____ (H) _____ (M)

Email Address: _____

Preferred Mailing Address: [] Residential [] Office [] Other Preferred Billing Address: [] Residential [] Office [] Others

SPOUSE'S PARTICULARS

Would you like to apply for Spouse Membership at additional \$10.90 w/GST per month? [] Yes [] No

[Mr] [Mrs] [Ms] [Mdm] [Dr] [Prof] [Assoc. Prof] [Others: _____]

Full name as in NRIC/Passport: (Underline Surname) _____

Preferred Name on Card: _____

NRIC/Passport No: _____ Nationality: _____

Date of Birth: ____ / ____ / ____ Gender: [Male / Female] Race: _____

Highest Education Attained: _____

Contact No: _____ (H) _____ (M)

Email Address: _____



Company Name (if any): _____

Position/Job Title: _____ Type of Business: _____

CHILD(REN) PARTICULARS

Would you like to apply for junior Membership? Yes No

Category A1 (12 - 15 years old): Add on \$5.45 w/GST per month

Category A2 (16 - 25 years old): Add on \$10.90 w/GST per month

CHILD 1

Child's Name: _____

Child Gender: [Male / Female]

Preferred Name on Card: _____

Date of Birth: ____ / ____ / ____

NRIC/Passport No. (Last 4 characters): ____ _

Contact No: _____ (M)

Email: _____

Race: _____

Nationality: _____



CHILD 2

Child's Name: _____

Child Gender: [Male / Female]

Preferred Name on Card: _____

Date of Birth: ____ / ____ / ____

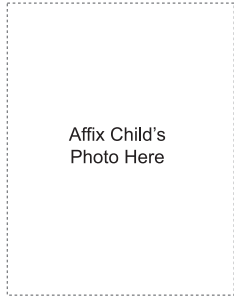
NRIC/Passport No. (Last 4 characters): ____ _

Contact No: _____ (M)

Email: _____

Race: _____

Nationality: _____



Cultural:

Choir DanceSport DramaWorks Music

Sports & Recreation:

Badminton Balut Billiards Bowling Bridge
 Cycling Darts Golf Pickleball Soccer
 Social Mahjong Squash Table Tennis Tennis

Interest:

Business Connect Chess Scuba Diving NUSS Toastmasters Club

ii) NOMINEE 2

[Mr] [Mrs] [Ms] [Mdm] [Dr] [Prof] [Assoc. Prof] [Others: _____]

Membership ID:

Full name as in NRIC/Passport: (Underline Surname) _____ (for official use only)

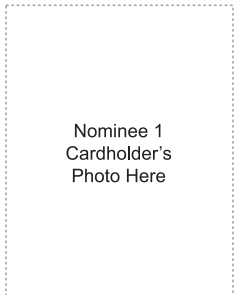
Preferred Name on Card: _____

NRIC/Passport No: _____ Nationality: _____

Date of Birth: ____ / ____ / ____ Gender: [Male / Female] Race: _____

Position / Job Title: _____

Marital Status: [Single] [Married] [Others]



	Name of University	Degree	Year of Graduation
1.			
2.			
3.			

Residential Address: _____

Postal Code: _____

Other Address (if any): _____

Postal Code: _____

Contact No: _____ (H) _____ (M)

Email Address: _____

Preferred Mailing Address: [] Residential [] Office [] Other Preferred Billing Address: [] Residential [] Office [] Others

SPOUSE'S PARTICULARS

Would you like to apply for Spouse Membership at additional \$10.90 w/GST per month? Yes No

[Mr] [Mrs] [Ms] [Mdm] [Dr] [Prof] [Assoc. Prof] [Others: _____]

Full name as in NRIC/Passport: (Underline Surname) _____

Preferred Name on Card: _____

NRIC/Passport No: _____ Nationality: _____

Date of Birth: ____ / ____ / ____ Gender: [Male / Female] Race: _____

Highest Education Attained: _____

Contact No: _____ (H) _____ (M)

Email Address: _____

Company Name (if any): _____

Position/Job Title: _____ Type of Business: _____



Affix Spouse's Photo Here

CHILD(REN) PARTICULARS

Would you like to apply for junior Membership? Yes No

Category A1 (12 - 15 years old): Add on \$5.45 w/GST per month

Category A2 (16 - 25 years old): Add on \$10.90 w/GST per month

CHILD 1

Child's Name: _____

Child Gender: [Male / Female]

Preferred Name on Card: _____

Date of Birth: ____ / ____ / ____

NRIC/Passport No. (Last 4 characters): ____ _

Contact No: _____ (M)

Email: _____

Race: _____

Nationality: _____



Affix Child's Photo Here

CHILD 2

Child's Name: _____

Child Gender: [Male / Female]

Preferred Name on Card: _____

Date of Birth: ____ / ____ / ____

NRIC/Passport No. (Last 4 characters): ____ _

Contact No: _____ (M)

Email: _____

Race: _____

Nationality: _____



Affix Child's Photo Here

Cultural:

Choir DanceSport DramaWorks Music

Sports & Recreation:

Badminton Balut Billiards Bowling Bridge
 Cycling Darts Golf Pickleball Soccer
 Social Mahjong Squash Table Tennis Tennis

Interest:

Business Connect Chess Scuba Diving NUSS Toastmasters Club

iii) NOMINEE 3

[Mr] [Mrs] [Ms] [Mdm] [Dr] [Prof] [Assoc. Prof] [Others: _____]

Membership ID:

Full name as in NRIC/Passport: (Underline Surname) _____

(for official use only)

Preferred Name on Card: _____

NRIC/Passport No: _____ Nationality: _____

Date of Birth: ____ / ____ / ____ Gender: [Male / Female] Race: _____

Position / Job Title: _____

Marital Status: [Single] [Married] [Others]



Nominee 1 Cardholder's Photo Here

	Name of University	Degree	Year of Graduation
1.			
2.			
3.			

Residential Address: _____
 _____ Postal Code: _____

Other Address (if any): _____
 _____ Postal Code: _____

Contact No: _____ (H) _____ (M)

Email Address: _____

Preferred Mailing Address: [] Residential [] Office [] Other Preferred Billing Address: [] Residential [] Office [] Others

SPOUSE'S PARTICULARS

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[Mr] [Mrs] [Ms] [Mdm] [Dr] [Prof] [Assoc. Prof] [Others: _____]

Full name as in NRIC/Passport: (Underline Surname) _____

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Date of Birth: ____ / ____ / ____ Gender: [Male / Female] Race: _____

Highest Education Attained: _____

Contact No: _____ (H) _____ (M)

Email Address: _____

Company Name (if any): _____

Position/Job Title: _____ Type of Business: _____



CHILD(REN) PARTICULARS

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CHILD 1

Child's Name: _____

Child Gender: [Male / Female]

Preferred Name on Card: _____

Date of Birth: ____ / ____ / ____

NRIC/Passport No. (Last 4 characters): ____ _

Contact No: _____ (M)

Email: _____

Race: _____

Nationality: _____



CHILD 2

Child's Name: _____

Child Gender: [Male / Female]

Preferred Name on Card: _____

Date of Birth: ____ / ____ / ____

NRIC/Passport No. (Last 4 characters): ____ _

Contact No: _____ (M)

Email: _____

Race: _____

Nationality: _____



Cultural:

[] Choir [] DanceSport [] DramaWorks [] Music

Sports & Recreation:

[] Badminton [] Balut [] Billiards [] Bowling [] Bridge
 [] Cycling [] Darts [] Golf [] Pickleball [] Soccer
 [] Social Mahjong [] Squash [] Table Tennis [] Tennis

Interest:

[] Business Connect [] Chess [] Scuba Diving [] NUSS Toastmasters Club

MEMBERSHIP INFORMATION

1. Eligibility

- a. Nominee(s) must be under the employment of the same Corporation and are graduates of recognised local and foreign universities.
- b. Spouse(s) of nominee(s) may apply for Spouse Membership. (Note: A Spouse Member is not entitled to any of the rights and privileges of members except those approved by the Management Committee.)
- c. Admission to NUSS is at the sole discretion of the Management Committee.
- d. Membership will be registered in the name of the Corporation.

2. Entrance Fee

- a. The current entrance fee for Corporate Membership is at \$13,080 w/GST for up to three (3) nominees.
- b. Each Corporation is allowed to have a maximum of three (3) nominees.

3. Monthly Subscription Fee

The monthly subscription fee is \$109 w/GST and \$10.90 w/GST monthly for Spouse Members. The monthly subscription fee billing commences once the application is approved by the Management Committee.

4. Transfer Fees

- a. **Change of nominee** An admin fee of \$218 w/GST applies for each change of nominee.
- b. **Transfer to another Corporation** A transfer fee of \$6,540 w/GST applies for a Corporate Membership transfer. All nominee account(s) will cease after the transfer.

5. Credit Deposit

A credit deposit of \$100 applies for each nominee that is refundable to the Corporation upon the resignation of membership for the nominee account.

6. Documents to accompany Application Form

To expedite processing, please complete the Membership Application Form overleaf in full with the following documents:

Each nominee

- a. A copy of university degree;
- b. Our team will contact you to arrange for the sighting of your NRIC/passport;
- c. Entrance fee payment receipt;
- d. One (1) recent passport-sized colour photograph (soft copy acceptable).
- e. If applying for Spouse Membership, one (1) recent passport-sized colour photograph (soft copy acceptable).
For verification purpose, we will also arrange for the sighting of your spouse's NRIC/Passport & Marriage Certificate for proof of relationship between the main member and spouse applicant.

Payment

Full payment (NETS/Cash/Credit Card/Cheque payable to "NUSS" in full) of:

- a. \$13,080 w/GST + \$100 [credit deposit] for each nominee.

7. Notes for New Members

- a. The GST on the entrance fee is payable in full upon application and is non-refundable.
- b. Please allow 21 working days for processing.
- c. NUSS reserves the rights to withdraw or amend any promotions without prior notice.

*Incomplete documents will not be processed.
Terms and conditions is correct at the time of print. (June 2026)*

DECLARATION BY APPLICANT & NOMINEE(S)

- I, the applicant / nominee(s), hereby understand the above listed and declare that the particulars in this application form are correct.
- I, the applicant, understand that upon admission as a member, the entrance fee is non-refundable. The balance of the entrance fee, if any, becomes due and payable immediately in the event of resignation or expulsion from the Society.
- I, the applicant, understand that I am responsible for the conduct and behaviour of my nominee(s) and be liable for the payment of all entrance fees, subscription fees, transfer fees if applicable, and any other monies due on the accounts of its nominee(s) and in respect of its membership. Any amount owing arising from resignation or membership transfer will be made payable via cheque to the Corporation.
- I, the applicant / nominee(s), agree to comply with and be bound by the Constitution, Rules and Regulations of the Society, as may from time to time be in force.
- I, the applicant / nominee(s), agree to receive emails on all publicity from the Society and may choose to unsubscribe upon receipt of such emails.

.....
Applicant's Name / Signature / Date:
Designation:

.....
Company's Stamp:

.....
Nominee 1's Name / Signature / Date:
Designation:

.....
Spouse's Name / Signature / Date:
(If applying for Spouse Membership)

.....
Nominee 2's Name / Signature / Date:
Designation:

.....
Spouse's Name / Signature / Date:
(If applying for Spouse Membership)

.....
Nominee 3's Name / Signature / Date:
Designation:

.....
Spouse's Name / Signature / Date:
(If applying for Spouse Membership)

FOR OFFICIAL USE		
Membership Salesperson :	Signature:	Date: