



SINGAPORE CHAMBER OF MARITIME ARBITRATION

Co. registration 200909099K
32 Maxwell Road, #02-14 Maxwell Chambers, Singapore 069115
Tel +65 63240552 | Fax +65 6324 1565
www.scma.org.sg | Email mail@scma.org.sg

INDIVIDUAL MEMBERSHIP APPLICATION

PERSONAL PARTICULARS

Title Family Name Gender: Male / Female

Given Name Nationality

NRIC Nos. /FIN Nos./Passport Nos. Date of Birth [dd/mm/yyyy]

Mailing Address

.....

Telephone Mobile Fax

Email

EMPLOYMENT/OCCUPATION

(Please state information of current or immediate past employment.)

Name of Employer

Occupation

Address of Company

Summary of professional, commercial or technical qualifications and experience

.....

.....

.....

.....

DECLARATION

I apply to join Singapore Chamber of Maritime Arbitration and enclose payment of amount Singapore Dollars SGD _____
I agree, if admitted to membership, to abide by the Constitution and Bye-Laws of the Singapore Chamber of Maritime Arbitration. I understand that my payment will be refunded if I am not admitted as a member.

By Cheque <input type="checkbox"/> (Pay to "Singapore Chamber of Maritime Arbitration")	VISA** <input type="checkbox"/>	MasterCard <input type="checkbox"/>
Name of Bank	Card Nos.	Name of Card Holder
Bank Branch	SGD	Expiry Date
Cheque nos.	Card Holder Signature	
SGD		

****Unless commencing payment in January, a prorated payment for balance of the year should be made. SCMA Financial Year ends on 31st December. Kindly log on to our website and refer to our prorated reference table.**

****VISA is only Applicable for Foreign Members**

.....
Applicant Name & Signature

.....
Date