



Ordinary and Associate Corporate Member

To be completed by Authorized Signatory.

A company profile should be included with the applicant.

Please affix
a passport
size photo of
nominated
representative
here

Name of Company

Authorised Officer

Name (Dr/Mr/Ms/Mrs/Mdm)

Designation

Nominated Representative

(the nominated representative will receive all correspondence and will hold the Member's voting rights)

Name (Dr/Mr/Ms/Mrs/Mdm)

Age:

Sex: M/F

Mailing Address

Designation:

Office Tel No.

E-mail:

Facsimile:

Representative (Please limit to maximum 4 persons)

	Name	Designation	Office Tel No.
a.			
b.			
c.			
d.			

Note: If no representatives name given, GAS will deal directly with Nominated Representative of the Company

Nature of Business (Please tick the appropriate box)

- ☐ Production
- ☐ Separation and Treatment
- ☐ Transmission and Distribution
- ☐ Wholesale and Retail of Gas
- ☐ Others, (please fill) _____

Please include with this application form

- a. Profile of the Company
 - b. Business Card of Nominated Representative
 - c. Payment for subscription fee for first year of membership
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Subscription Fee

The annual subscription fee shall be:

- a. Ordinary Corporate Member- S\$1000
- b. Associate Corporate Member- S\$500

Subscription rates will be reviewed by the Committee from time-to-time to ensure the viability of the Association.

Payment Details

- ☐ A cheque is enclosed.
(All cheques should be made payable to the Gas Association of Singapore)
 - ☐ A receipt is required.
 - ☐ A receipt is not required.
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Please return this to:

Gas Association of Singapore
c/o PowerGas Ltd
10 Pasir Panjang Road #03-01
Mapletree Business City
Singapore 117438

Tel no: (65) 6378 8626

Declaration

If admitted as a member of the Gas Association of Singapore, I agree to abide by the provisions of the Constitution of the Gas Association of Singapore and any Rules, Regulations and/ or By-laws made pursuant thereto.

Signature of Authorised Officer

Date

For Official Use Only

- ☐ Approved on _____
Member's Registration No: _____

- ☐ Remarks:
