



**FIFTH
SEASON**
TANGRA CHINESE

MEMBERSHIP FORM

Card Number:

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Date:

D	D	M	M	Y	Y	Y	Y
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28 Race Course Road, Singapore 218550, Tel: 62934842, www.fifthseason.com.sg

*Name:

Given Name:

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Family Name/Surname

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*Email Address:

*Date of Birth :

D	D	M	M	Y	Y	Y	Y
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*Sex:

Male Female

*Marriage Anniversary Date :

D	D	M	M	Y	Y	Y	Y
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Office Details:

*IC Number:

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*Mobile Number:

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Residence Address:

Block/House No.:

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Floor No.:

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Unit No.:

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Postal Code:

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Street Name:

Building Name: _____

Family Members:

Sl No.	Name	Date of Birth								Sub Card Number
1.		D	D	M	M	Y	Y	Y	Y	
2.		D	D	M	M	Y	Y	Y	Y	
3.		D	D	M	M	Y	Y	Y	Y	
4.		D	D	M	M	Y	Y	Y	Y	

Notes:

- (*) Mandatory fields.
- Card will be issued on completion of the form. Family members will be entitled for the same benefit and sub card will be issued for our record purpose to extend the birthday discounts to family members.
- The email will only be used for information or promotion of the restaurant and will be kept confidential with the company.