AMATEUR MUAYTHAI ASSOCIATION (SINGAPORE) MEMBERSHIP

APPLICATION FORM

Dear Sir, thank you for your interest in becoming a member of AMA(S). We will require the following information to be filled up in order to process your application. Please note, that submission of form together with the membership application fee of S$500.00 does not constitute immediate membership into AMA(S). Kindly complete the form to prevent delay in membership approval.

Registered Name of School/Gym in Not Applicable:

Director of Company: MR MS MDM
Last Name:
First Name:

Operations Manager: MR MS MDM
Last Name:
First Name:
Contact No.:

Point of Contact: MR MS MDM
Last Name: First Name: Contact No.:

Public Liability Insurance No.:

Insurance Company :

Address of place of operation: Postal Code:

Full Name of Instructor: Qualification of Instructor: Organisation of Certification:

Full Name of Instructor:
Qualification of Instructor:
Organisation of Certification:

Cheque No.: Bank of Cheque:

*Kindly attach layout plans and equipment used.

I _____ of NRIC/Passport No. _____ , confirm that I am the approved representative of the said Company/Gym. I also accept the rules, regulations and terms of standards as laid out in AMA(S)'s Constitution and ANNEX 17.