



Date of Application: _____

De La Salle Alumni Association Registration Form

Name (as in NRIC):		NRIC / Passport number:	
Mobile (HP):		Tel (Home):	
E-Mail:			
Address:			
Gender: Male / Female		Date of Birth:	
Race:		Number of Children: _____	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced			Number of Children: _____
Religion: <input type="checkbox"/> Catholic <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Taoist <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Other: _____ <i>(Tick one only)</i>			
Academic Qualification: <input type="checkbox"/> O-Level <input type="checkbox"/> A-Level <input type="checkbox"/> Diploma <input type="checkbox"/> IB-Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Masters <input type="checkbox"/> PhD <i>(Tick all that apply)</i>			
Alumni Membership Type: <i>(Tick one only)</i>		<input type="checkbox"/> Ordinary <input type="checkbox"/> Associate <input type="checkbox"/> Old Boy <input type="checkbox"/> Teacher / Ex-teacher <input type="checkbox"/> Ex-Lasallian <input type="checkbox"/> Ex-Lasallian <input type="checkbox"/> Others: _____ Graduating Year: _____ Graduating Year: _____	
Current Work Status: <i>(Tick all that apply)</i>		<input type="checkbox"/> Student <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Others: _____	
Industry Speciality: <i>(Tick all that apply)</i>			
<input type="checkbox"/> Arts & Entertainment <input type="checkbox"/> Construction <input type="checkbox"/> Engineering <input type="checkbox"/> Healthcare <input type="checkbox"/> Legal <input type="checkbox"/> Sales & Marketing <input type="checkbox"/> Banking <input type="checkbox"/> Civil Service <input type="checkbox"/> F&B <input type="checkbox"/> Insurance <input type="checkbox"/> Military <input type="checkbox"/> Others: _____ <input type="checkbox"/> Business <input type="checkbox"/> Education <input type="checkbox"/> Finance <input type="checkbox"/> IT <input type="checkbox"/> Real Estate			
Current Sporting Interest: <i>(Tick all that apply)</i>			
<input type="checkbox"/> Athletics <input type="checkbox"/> Canoeing <input type="checkbox"/> Fencing <input type="checkbox"/> Hockey <input type="checkbox"/> Running <input type="checkbox"/> Soccer <input type="checkbox"/> Table Tennis <input type="checkbox"/> Badminton <input type="checkbox"/> Cheerleading <input type="checkbox"/> Golf <input type="checkbox"/> Judo <input type="checkbox"/> Netball <input type="checkbox"/> Squash <input type="checkbox"/> Tennis <input type="checkbox"/> Basketball <input type="checkbox"/> Cycling <input type="checkbox"/> Gymnastics <input type="checkbox"/> Rugby <input type="checkbox"/> Sailing <input type="checkbox"/> Swimming <input type="checkbox"/> Ten Pin Bowling			
Interested Alumni Activities: <i>(Tick all that apply)</i>			
<input type="checkbox"/> Fund Raising <input type="checkbox"/> Networking Events <input type="checkbox"/> Musical <input type="checkbox"/> Alumni Patron Charity Golf <input type="checkbox"/> Mass/Thanksgiving <input type="checkbox"/> Food & Fun-Fair <input type="checkbox"/> Cultural & Arts Festival <input type="checkbox"/> Alumni Sub-Committee <input type="checkbox"/> Sports Fiestas <input type="checkbox"/> Reunions			
Payment Mode:			
<input type="checkbox"/> Cash Payment – Made Personally to De La Salle School <input type="checkbox"/> Cheque Payment – Made to <u>De La Salle Alumni Association</u>			
For Administrative Use Only:			
Cheque Number: _____		Date of Cheque: _____	
Receipt Number: _____			