



HOSPITALITY BEYOND BORDERS

FULL MEMBER APPLICATION FORM

ASSOCIATION REG.NO. UEN: T12SS0023H

Name of Association : _____

Association Acronym : _____

Registration Number : _____

Address : _____

Country : _____

President Name : _____

Contact Person : _____ Mobile/Tel : _____

Email Address : _____ Website : _____

** I (on behalf of my Association) agreed and will comply with the rules and regulations as stipulated in IFBA constitution.*

Name : _____ Signature : _____

Designation : _____ Date : _____

** Complete application form is to be mailed at: membership@ifbaworld.com*

MEMBERSHIP CATEGORY	YEARLY SUBSCRIPTION
FULL MEMBERSHIP	SGD 500.00

FOR OFFICIAL USE INTERNATIONAL FOOD BEVERAGE ASSOCIATION /OCBC BANK ACC: 641-464797-001

Cheque No.:	Amount :
Receipt Issued No.:	Bank In Date:

RECEIVED BY : _____ <small>(Name)</small>	_____ <small>(Signature / Date)</small>
APPROVED BY : _____ <small>(Name)</small>	_____ <small>(Signature / Date)</small>
YEAR OF ACCEPTANCE : _____	_____ <small>(Remarks)</small>



1 Choa Chu Kang Grove ITE College, West Singapore, 688236 Singapore



www.ifbaworld.com