

TO: Secretary
SATS Staff Association
20 Airport Boulevard
Singapore Changi Airport
SINGAPORE 819659



STAFF
ASSOCIATION



SATS STAFF ASSOCIATION NEW MEMBERS APPLICATION FORM

I wish to join SATS Staff Association (SSA) as a member and make a monthly contribution towards SSA for the duration of my employment in SATS.

I hereby authorise Payrolls Section (Finance Department) to deduct:

\$2 \$5 \$10 \$15 \$20 any other value _____ a month

with effect from the following month as part of my monthly contribution.

To assist SSA in planning and organizing community service projects, please answer the following questions. Select one or more options, where applicable.

1. I would like to assist in the planning and organization of SSA activities.

Yes No

2. I have a strong interest to work with _____.

Elderly Young Children
 Youths No preference

3. I prefer to work on the following types of community service projects _____.

Interactive session Bring beneficiaries on outings
 Minimal interaction Others _____ (please specify)

4. I am open to volunteering on _____.

Weekdays (during office hours) Weekends or after-office hours

NAME :

STAFF NO. :

DEPARTMENT :

COMPANY :

Signature :

Date :