



MEMBERSHIP APPLICATION

Please return completed form with your payment to Care & Actions For Strays, Brunei Darussalam

For enquiries, Email : care.actionsforstrays@gmail.com

Name : _____

Date of Birth : _____ Nationality : _____

Occupation : _____ IC Number : _____

Postal Address : _____

Company Name : _____

Company Address : _____

Telephone : Home : _____ Office : _____ Mobile : _____

Email : _____ **Please note that email is our main method of communication.*

Member of Other Associations : No Yes *Please list all other memberships below, use reverse if more then 6*

1) _____ 4) _____

2) _____ 5) _____

3) _____ 6) _____

Type of membership (please check appropriate category of membership)

Annual Memberships (choose one only)

By invitation only	<input type="checkbox"/>	Full Membership (with voting rights)	B\$ 100.00 per annum
Open to public	<input type="checkbox"/>	Associate Membership (without voting rights)	B\$ 50.00 per annum
For students above 18	<input type="checkbox"/>	Student Membership 1 (above 18 years old)	B\$ 30.00 per annum
For students below 18	<input type="checkbox"/>	Student Membership 2 (below 18 years old)	B\$ 20.00 per annum

Payment in favour of 'Care & Actions For Strays' for membership fees B\$ _____

A kind donation B\$ _____

Total Amount Enclosed : B\$ _____

(Kindly indicate full name and contact number on the reverse of cheque for our easy reference)

(DD / MM / YYYY) Signature of Applicant : _____
(for e-submission, just type name above)

Application Date : ____ / ____ / ____

CAS Official Use Only	<input type="checkbox"/>	Approved by committee : _____	Date : ____ / ____ / ____
Official Receipt No : _____	Issued By : _____	Date : ____ / ____ / ____	_____
Membership No : _____	Asgnd By : _____	Date : ____ / ____ / ____	_____
Card Collected : _____	Rleasd By : _____	Date : ____ / ____ / ____	_____

Procedures For Membership Application & Payment

- 1) Fill in application form completely
- 2a) Submit via email and pay via internet banking *[invited full members will pay only upon approval of membership]*

Bank Account Details :

Bank	: Standard Chartered Bank	Bank	: HSBC
Name	: Care & Actions For Strays	Name	: Care & Actions For Strays
A/C No.	: 01 001 23008000	A/C No.	: 001 061282 001

- ai) Treasurer to verify funds received, issue OR, fill in OR number on form, forward soft copy form to admin team
 - a ii) Original OR treasurer will pass to admin team for collection together with membership card
 - a iii) Admin team assign membership number (CAS/FM-00001 ; CAS/AM-00001; CAS/SM1-00001)
 - a iv) Fill membership number on form and print 2 copies, forward 1 to treasurer for filing, other to graphics team for member card processing
 - a v) Treasurer will attach 2nd ply OR to form received from admin team and file under finance filing
 - a vi) Graphics team will process member's card and return form with printed member's card to admin team for collection
 - a vii) Admin team to attach original OR (1a ii above) to member's card for collection
- 2b) Submit with payment to Wendy (Ada's assistant) in A-Fontane office :
No. 23, Blk B, Bgn Warisan PHN, Spg 68, Jln Muara, Kg Serusop, BB4713, Bandar Seri Begawan, Negara Brunei Darussalam
 - b i) Wendy to issue OR to applicant, make copy of membership form received
 - b ii) Wendy to attach payment and 2nd ply OR to form copy and forward original + copy to admin team
 - b iii) Admin team assign membership number (CAS/FM-00001 ; CAS/AM-00001; CAS/SM1-00001)
 - b iv) Fill membership no. on both copy forms, forward 1 to treasurer for filing, other to graphics team for member card processing
 - b v) Treasurer will deposit funds and file copy with copy OR under finance filing
 - b vi) Graphics team will process member's card and return form with printed member's card to admin team for collection