

New Member

Professional S\$200.00

Renewal

INFORMATION

Full Name: _____ Date of Birth (DDMMYYYY): _____

Gender: _____ Nationality: _____

Home Address: _____

Personal Contact: (Home) _____ (Mobile) _____

Email: _____ Personal Website: _____

Design Discipline:

Architecture Furniture Interior Others
 Environment Graphic New Media _____
 Exhibition Industrial Textile & Fashion

Years of professional practice: _____

Countries where you have worked as a professional: _____

Education & Highest Qualification achieved: _____

Registered Place of Practice

Company: _____ Designation: _____

Company Website: _____ Email: _____

Contact: (Office) _____ (DID) _____ (Fax) _____

What would you like the DBC to do for you? Please rank in order of preference from 1 to 5, 1 being the most important.

Company Capability Development

Partnership Opportunities

Overseas Expansion

Professional Certification

Others (*please specify*): _____

Please submit your **personal portfolio** of at least 3 projects to info@dbcsingapore.org.

PAYMENT

Amount payable: S\$ _____

Enclosed is my cheque made payable to **Design Business Chamber Singapore** (please cross all cheques) which I understand will be refunded should my application be unsuccessful.

Signature

Date