

Singapore Soka Association 新加坡创价学会

Women Division Function Group Application Form

妇人部运营组申请表格

Application for Group 申请组别 _____

Name as in NRIC (English) 身份证的英文姓名		Chinese Name (If any) 中文姓名	
Occupation 职业		Date of Birth 出生日期	Nationality 国籍
Address 地址			
Tel 电话 (Home 住家)		Mobile 手机	
RHQ 区域总部	Zone 本部	Chapter 支部	
District 地区	Division 部别	Position 役职	
Special Skill 特别技术		Interest 兴趣	
Previous Cultural participation 过去所参加过的文化活动		If you are involved in other SSA Culture/Special/ Function Group, please specify 若有参与其他的SSA文化组/特别组/运营组, 请加以注明	
State any past /current injury or medical condition and drug allergy 请注明过去、目前所受过的伤、任何健康状况与药物过敏			
<p>1) I consent to the above information being collected, used and disclosed by Singapore Soka Association so that the Association may facilitate my participation in the activity for which this application is made.</p> <p>2) By signing this Women Division Function Group Application Form, I agree that Singapore Soka Association may collect, use and disclose my personal data, as provided in this registration form, for the following purposes in accordance with the Personal Data Protection Act 2012 and our data protection policy.</p> <p>(a) the processing of this Women Division Function Group Application; and</p> <p>(b) the recording of these information in our system.</p> <p>3) Please visit our website at (https://ssabuddhist.org/pdpa/) for further details on our data protection policy, including how you may access and correct your personal data or withdraw consent to the collection, use or disclosure of your personal data.</p> <p>1) 我同意新加坡创价学会收集、使用和披露以上资料, 以方便我参与有关此申请的活动。</p> <p>2) 签署这份“妇人部运营组申请表格”表示我同意让新加坡创价学会 (SSA) 依据2012年个人资料保护法令和SSA的资料保护政策, 收集、应用和透露您填写在此表格的个人资料作为以下用途:</p> <p>(a) 进行此妇人部运营组申请的处理</p> <p>(b) 将资料储存在我们的系统</p> <p>3) 关于SSA的资料保护政策, 包括您如何能进入去更改您的个人资料或取消同意收集、应用和透露您的个人资料的详情, 可浏览SSA网站 (https://ssabuddhist.org/pdpa/) 了解更多。</p>			
Applicant Signature 申请者签名		Date 日期	
_____		_____	
Acknowledgement by Function Group Chief 运营组组长确认			
