

REINSURANCE BROKERS' ASSOCIATION (SINGAPORE)

Established on the 19th December 1995 under The Societies Act (Chapter 311)

Secretariat

69 Amoy Street
Singapore 069888
Telephone: (65) 6372 3189
Facsimile: (65) 6224 1091
Email: secretariat@rbas.org.sg

RBA(S) MEMBERSHIP APPLICATION

RBA(S) Constitution, Article, Membership, Section 1, Members, (6)

All applications for membership shall be submitted in writing to the Secretary of the Association. An application for membership shall be determined by the Association in General Meeting in accordance with the qualification requirements herein mentioned. An applicant for membership shall be given written notification of the Association's decision as soon as practicable by the Secretary (or in his or her absence by any other member of the Association duty authorised for such purpose). Any applicant for membership who is not approved for admission as a member shall be entitled to request the Secretary in writing within 30 days of the receipt of notification of rejection for a review of the Association's decision. The outcome of such review shall be final and binding.

Name of Company:

Date Established:

Address:

Telephone Number:

Facsimile Number:

Email:

Description of Business Activity:

CLASS OF MEMBERSHIP APPLIED FOR (RBA(S) Constitution, Article 3, Section 1)

Please indicate which class of membership the organisation is applying for:

- (a) **Ordinary Member**
Reinsurance broking organisations
- (b) **Associate Member**
Entities approved for membership by RBA(S) in General Meeting
- (c) **Honorary Member**
Individuals whom RBA(S) in General Meeting considers to have made a significant contribution to the reinsurance broking community and the reinsurance industry in Singapore

DETAILS OF APPLICANT

Name of Chief Executive Officer:

Professional Indemnity Coverage:

- Limit of Indemnity
- Excess

Company's Representative besides CEO:

A copy of the latest audited report and accounts is to accompany this Application.

SUBSCRIPTIONS

Entrance Fee S\$7,500
Annual Subscription S\$1,000

We declare herewith to the best of our knowledge and belief that the information given in this application is true.

Date:

Signature :

Name :

Designation: