



Name as per ID: _____ Membership ID: _____
(If applicable)

Email: _____ Contact No.: _____

Address: _____

Payment For: <input checked="" type="checkbox"/> Tick where appropriate	
1. Membership Application Affiliate <input type="checkbox"/> Associate <input type="checkbox"/> CA (Singapore) CA (Singapore) who is a Public Accountant 2. Registered Mail of Certificate <input type="checkbox"/> Local (S\$ 8.00) <input type="checkbox"/> Overseas (S\$ 20.00) 3. Reinstatement	4. CPE Training <input type="checkbox"/> Seminar: <input type="checkbox"/> Deferment: <input type="checkbox"/> Others: _____ _____ (Please indicate course code, title and session)
Cheque Details	
Cheque No. : _____ (payable to "Institute of Singapore Chartered Accountants") Amount: S\$ _____	
Please indicate your name as per ID, contact number and Membership ID (if applicable) behind the cheque and mail to the address stated above.	
Credit Card Details	
I hereby authorize Institute of Singapore Chartered Accountants to charge to my credit card of which the details are given below.	
Credit Card: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard AMEX	
Credit Card No: _____ - _____ - _____ - _____	
Card Expiry Date: ____ / ____ (MM/YY)	
Cardholder's Name: _____	
Cardholder Signature: _____ Amount: S\$ _____	
PayNow Instructions	
1. Log in to your mobile banking application. 2. Select "PayNow" and key in ISCA's Unique Entity Number (UEN): <u>T04SS0109E</u> 3. Key in the required amount and pay.	
Please provide a screenshot of the transaction as proof of payment and send it together with this form to: cpe@isca.org.sg (course-related) or membership@isca.org.sg (membership-related).	
Bank Transfer	
Transfer payment to the relevant bank account (see next page) and send a screen shot of the transaction as proof of payment to cpe@isca.org.sg (course-related payments) or membership@isca.org.sg (membership-related payments).	
Declaration	
I confirm that I have read and I agree to the Privacy and Data Protection Policy (http://isca.org.sg/privacy-and-data-protection-policy/) which sets out how my personal data will be collected, used, disclosed and processed by the Institute of Singapore Chartered Accountants and the purposes of processing.	
_____ Signature/Date	
For Official Use:	
Receipt no: _____	Remarks: _____

Bank Transfer Details

For course-related payment:

Account Name: Institute of Singapore Chartered Accountants DBS
Bank Name: Bank Ltd
Branch Name: MBFC Branch
Bank Address: 12 Marina Boulevard, Level 3 MBFC Tower 3, Singapore 018982
Bank Code: 7171
Swift Address: DBSSSGSG
Account No: 003-909250-4
Currency: Singapore Dollar

Please provide a **screen shot of the transaction** as proof of payment and send it together with this form to cpe@isca.org.sg.

For membership-related payment:

Account Name: Institute of Singapore Chartered Accountants DBS
Bank Name: Bank Ltd
Branch Name: Raffles City Branch
Bank Address: 252 North Bridge Road, #02-26A/B Raffles City Shopping Centre, Singapore 179103
Bank Code: 7171
Swift Address: DBSSSGSG
Account No: 033-000107-0
Currency: Singapore Dollar

Please provide a **screen shot of the transaction** as proof of payment and send it together with this form to membership@isca.org.sg.