

WhizzCar SUPPLEMENTARY MEMBERSHIP APPLICATION FORM

PRINCIPAL MEMBER DETAILS

Member ID	Full Name as in NRIC / Passport Dr / Mr / Ms / Mrs / Mdm
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MY PERSONAL PARTICULARS – SUPPLEMENTARY MEMBER

Full Name as in NRIC / Passport Dr / Mr / Ms / Mrs / Mdm		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
NRIC / FIN / Passport No.	Nationality	DOB (DD/MM/YYYY)
Race <input type="checkbox"/> Chinese <input type="checkbox"/> Malay <input type="checkbox"/> Indian <input type="checkbox"/> Others (Pls state):		
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		
Highest Education <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Pre-U <input type="checkbox"/> Diploma <input type="checkbox"/> University <input type="checkbox"/> Post Grad		
Residence Type <input type="checkbox"/> HDB (3rm / 4rm / 5rm / Exe) <input type="checkbox"/> Condo <input type="checkbox"/> Landed <input type="checkbox"/> Others (Pls state):		
Residence is <input type="checkbox"/> Mortgaged <input type="checkbox"/> Employer's <input type="checkbox"/> Owned <input type="checkbox"/> Parents' <input type="checkbox"/> Rented		
Relationship to Member		

MY CONTACT DETAILS - SUPPLEMENTARY MEMBER

Home Address _____ _____ S(_____)	Contact No. _____ (Home) _____ (Mobile)
Mailing Address _____ (If different from home address) _____ S(_____)	E-mail _____ Note: All WhizzCar correspondences & reservation details will be sent to this e-mail

MY WORK - SUPPLEMENTARY MEMBER

Company Name _____ Address _____ _____ S(_____)	Job status <input type="checkbox"/> Employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Others (Pls state): Designation _____ Contact No. _____ (Office) _____ (Fax)
Gross Monthly Salary S\$ _____	Length of Employment YY MM

MY DRIVING EXPERIENCE - SUPPLEMENTARY MEMBER

Driver's Licence No. _____ Type of Licence <input type="checkbox"/> Local <input type="checkbox"/> International I qualified for my Driver's Licence on (DD/MM/YYYY)	Any Traffic Demerit Points? <input type="checkbox"/> No <input type="checkbox"/> Yes, how many points? _____ Involved in road accidents? <input type="checkbox"/> No <input type="checkbox"/> Yes, specify type: _____
During the past 12 months, I've driven a vehicle independently for <input type="checkbox"/> Below 30hrs <input type="checkbox"/> 30-60hrs <input type="checkbox"/> 60-100hrs <input type="checkbox"/> Over 100hrs	
Do you or your family own a car? <input type="checkbox"/> Yes, for _____ years <input type="checkbox"/> In the past <input type="checkbox"/> Never	
Other than a car, other means of transport used frequently <input type="checkbox"/> Bus <input type="checkbox"/> MRT <input type="checkbox"/> Taxi <input type="checkbox"/> Others:	

POPULAR RENT A CAR PTE LTD

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