



Overseas Members Information Form

Date of Information :		
Name :		
Date of Birth :		
Date of Joining SGI :		
Overseas Organisation :		
Home Address (in your country) :		
Home Mobile (in your country) :		
Study Level :		
Responsibility:		
Division :	YWD / YMD / WD / MD / Others _____	
Period from :		To:
Reason of Visit (any other comments) :		

New Zealand

Home Address :	
Home Phone :	
Mobile :	
Email address :	

Office Use Information Only

Received By: _____ Dated on: _____
 Entered into Database: _____ Dated on: _____
 Divisional HQ Informed: _____ Dated on: _____
 District Allocated: _____

Other Remarks: _____