

The Japanese Association, Singapore

Personal Data Correction Request Form

- 1 Please note that The Japanese Association, Singapore reserves the right to refuse to comply with your Data Correction Request as may be permitted under the Personal Data Protection Act 2012.
- 2 Personal data collected on this form is required to enable your Data Correction Request to be processed, and will only be used in connection with such request.
- 3 A response to this request will be given within 30 days from receipt.
- 4 By submitting this request, you consent to have the correct personal data sent to specific organisations, to which the personal data was disclosed by The Japanese Association, Singapore within a year before the date the correction was made.
- 5 This application should be posted to The Japanese Association, Singapore [Attention: Personal Data Protection Officer] at 120 Adam Road, Singapore 289899 or email to info@jas.org.sg.

Membership No :

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Corporate M'ship No (If applicable) :

Z				
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Mailing Address:

The Japanese Association Singapore
Attn: Personal Data Protection Officer
120 Adam Road Singapore 289899

Name : _____

Effective Date : _____ / _____ / _____
DD MM YYYY

★Please tick on changes

NRIC / Passport No :	
Home Tel : _____	
Handphone No (Main) : _____ (Spouse) : _____	
Home Address : _____ Singapore ()	
Email 1 (Mass Email&Password) _____ @ _____	
Email 2 (Mass Email&Password) _____ @ _____	
Mailing Address : Newsletter / Others <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Don't Send ※Reminder will be sent to registered company address or residential address.	
Previous Company Name (Company Membership No Z _____) : _____	Date of Birth(Main) ____ / ____ / ____ DD MM YYYY
New Company Name (Company Membership No Z _____) : _____	
Address and contact number: TEL : 65- _____ - _____	

Declaration

I hereby declare and confirm that all information provided by me in connection with this Correction Request is true, accurate and complete. I agree that The Japanese Association, Singapore, may contact me to verify my identity or request for additional details in connection with this request.

Signature : _____ Name : _____ Date : _____

For Office Use Only :	Date received :
Staff : _____ Date : _____	