



ASSOCIATION OF INFORMATION SECURITY PROFESSIONALS
CORPORATE MEMBERSHIP
APPLICATION FORM

ORGANISATION DETAILS

Name of Organisation	
Organisation Address	
Name of Authorised Applicant as in NRIC/FIN	Contact No
Applicant's Position	Email Address
Name of Contact Person (<i>if different from applicant</i>)	Contact No
Position	Email Address

FOR OFFICIAL USE

<input type="checkbox"/> Approve <input type="checkbox"/> Reject	Membership No:
Remarks	

MEMBERSHIP OPTION

Fee structure is based on total employees in the organisation enrol under the corporate membership. Employees are default to Affiliate membership or Associate membership (subject to AiSP approval). Separate AiSP Individual Membership Form and supporting documents must be submitted to AiSP for membership upgrade. The AiSP Individual Membership Form can be downloaded from www.aisp.sg/membership.html. Fees are before GST.

Up to 200 employees @ S\$17,000

Up to 300 employees @ S\$24,000

Up to 400 employees @ S\$30,000

DECLARATION

I certify that I have read and understood the instruction, and that the information supplied is correct to my best knowledge. I understand that any misrepresentation or incorrect information provided can result in discipline, including suspension or revocation of membership. I understand that AiSP reserved the rights to change the terms, conditions and benefits of the programme without prior notice. I also understand that, where necessary, information submitted may be disclosed whether in whole or part, to the relevant parties for assessment.

Applicant's Name & Signature

Company Stamp & Date