

MDIS PUSHCART RENTAL APPLICATION FORM

Part 1: Applicant Contact Details

Name of Applicant*: _____

NRIC No. / FIN*: _____ Nationality: _____

School : _____

MDIS Member MDIS Alumni Non-Members

Applicant Address: _____

Contact No. (HP)*: _____

Email Address*: _____

Part 2: Pushcart Details

Full Description of Merchandise* (To indicate clearly)

a) _____ b) _____

c) _____ d) _____

e) _____ f) _____

Price Range for Merchandise*: _____

Rental Period*: _____

Start Date*: _____ End Date*: _____

Pushcart Attendant Details:*

Name: _____ NRIC No./FIN: _____ HP No.: _____

Name: _____ NRIC No./FIN: _____ HP No.: _____

* denotes compulsory fields

Part 3: For Official Use

Approved Rejected

Receipt No.: _____

Cart A Cart B

You will be contacted to sign the MDIS Pushcart Rental Contract Agreement and make the necessary payment once your application is approved.

For further enquiries, please contact the Membership and Alumni Relations at

Tel: 6473 5885

Fax: 6796 7800

Email: members@mdis.edu.sg

Alternatively, log on to www.mdis.edu.sg for more details.