



# FILOLI MEMBERSHIP CARD APPLICATION FORM

MEMBERSHIP CARD NO. :\*

New  Renewal

\* Fill in by customer service

EXPIRED : MONTH :  YEAR :

## PERSONAL DATA

NAME SHOW ON CARD ( MAXIMUM 16 CHARACTERS )

COMPLETED NAME [according to Id card/KIMS/Passport]

DATE OF BIRTH SEX MARITAL STATUS  
 Date  Month  Year  M  F  Married  Not Married

RELIGION

NO. ID CARD/KIMS/PASSPORT

CURRENT ADDRESS

 NO  RT  RW 

CITY

ZIP CODE

TELEPHONE NUMBER

HOME

MOBILE

E-MAIL

How did you learn about us

Friend  Advertising  Family  Others

## OCCUPATION

OCCUPATION THE NAME OF COMPANY

OFFICE ADDRESS

CITY  ZIP CODE

TELEPHONE NUMBER

WORK

## APPROVAL SIGNATURE

Applicant,

Crew

Jakarta, \_\_\_\_\_  
Approved by,

FO02-MC-FORM.1.08