

注：不适用的栏目请填写 "N.A."。

Note: Kindly put "N.A." for fields that are not applicable.

个人资料 Personal Particulars		
姓名 Full Name		性别 Gender
出生年月 Date of Birth	学历 Highest Qualification	
工作单位及职务 Organisation & Designation		照片 PHOTO
长期居住地址 Residential Address		
移动电话 Mobile Number	电子邮箱 Email Address	
入会申请 Membership Application		
请填写入会理由与目的，并承诺承认和履行协会章程。 Please state your reasons and objectives for joining, and confirm your commitment to comply with the Association Constitution.		

介绍人意见（选填） Referrer's Comments (Optional)

介绍人意见
Comments from Referrer

介绍人签字
Referrer's Signature

日期
Date

个人资料保护声明 Personal Data Protection Notice

新加坡人工智能教育协会（“ARAILL”）将收集及使用申请人及介绍人在本申请表中提供的个人资料，用于：（1）评估及处理会员申请；（2）管理会员资格及会员记录；（3）就会员行政及服务事项与会员联系；（4）在会员报名或参与协会举办或协办的活动时，处理相关活动行政事项；以及（5）履行适用的法律及监管要求。

The Association for Research on AI in Learning and Leadership (“ARAILL”) will collect and use the personal data provided by the applicant and referrer in this application form for: (1) assessing and processing the membership application; (2) administering membership and maintaining membership records; (3) communicating with members regarding membership administration and services; (4) administering events for which the member registers or participates; and (5) complying with applicable legal and regulatory requirements.

如需查阅或更正个人资料、撤回同意，或咨询 ARAILL 如何处理个人资料，请联系资料保护联系人：office@araill.org。

For requests to access or correct personal data, withdraw consent, or enquire about ARAILL's handling of personal data, please contact the Data Protection Contact at office@araill.org.

自愿接收活动资讯 Optional Consent for Event Communications

本人同意 ARAILL 通过以下渠道向本人发送由 ARAILL 举办或协办的活动邀请及相关资讯（可多选）：

☐ 电子邮件（Email） ☐ 手机短信（SMS）

I consent to receiving invitations and information concerning events organised or co-organised by ARAILL through the selected channel(s) above.

本人可随时发送电子邮件至 office@araill.org 撤回上述同意。不提供或撤回此项同意不会影响会员申请、会员资格或必要的会员行政通知。

I may withdraw this consent at any time by emailing office@araill.org. Declining or withdrawing this consent will not affect my membership application, membership status or essential membership administration communications.

申请人声明 Applicant's Declaration

本人谨此声明，以上所提供的资料均真实、准确及完整，并同意遵守协会章程。本人确认已阅读并理解本申请表所载的《个人资料保护声明》。
I declare that the information provided in this application is true, accurate and complete, and agree to abide by the Association's Constitution. I acknowledge that I have read and understood the Personal Data Protection Notice in this application form.

申请人姓名及签名
Applicant's Name & Signature

填表日期
Application Date

协会备案 Association Official Use

编号
Membership No.

会长签字
President's Signature

协会公章及日期
Association Stamp & Date