

MEMBERSHIP APPLICATION FORM (PENANG STATE)

PERSONAL DATA

MEMBERSHIP NUMBER

*NAME IN FULL _____ *CHINESE NAME _____ *NATIONALITY _____
 *NRIC / PASSPORT NO _____ *DATE OF BIRTH _____ *MARITAL STATUS SINGLE MARRIED
 *RESIDENCE ADDRESS _____ *GENDER MALE FEMALE
 *HOME TEL _____ *H/P 1 _____ *H/P 2 _____ FAX _____
 URL _____ *EMAIL _____
 • I would like to receive PUMM news via email / fax (please indicate)

PROFESSION / TRADE

*NATURE OF BUSINESS _____
 *POSITION _____ *PRODUCT & SERVICES _____
 *COMPANY NAME _____
 *COMPANY ADDRESS _____
 *OFFICE TEL _____ FAX _____ URL _____
 *EMAIL _____

MEMBERSHIP FEES

REGISTRATION FEES (Compulsory) RM 100.00
 LIFE MEMBER (LM) RM 3000.00

PAYMENT

ENCLOSED HERE WITH CHEQUE
 CHEQUE NO. _____ AMOUNT _____

Made Payable to :
PERSATUAN USAHAWAN MAJU MALAYSIA
MAYBANK : 5071 3423 3710

For direct bank in, kindly return bank in slip as proof of payment. Please email to pummpg@gmail.com
 * Note: Deposit paid is non-refundable

PLEASE FILL UP EVERY COLUMN STATED WITH * .

DECLARATIONS

I confirm that all the above information is true and correct and I hereby agree to adhere to the rules & regulations of the association.
 I declare that I am not a bankrupt and I have never jailed for more than one year by any Malaysia court and never been fined for more than RM 2,000.00. I fully understand that the Board of Committee reserves all right to terminate and / or reject my application at any time for misconduct and / or failure to comply with the rules and regulations set out thereof.

 SIGNATURE OF APPLICANT
 DATE:

FOR OFFICE USE ONLY

NAME OF PROPOSER _____
 MEMBERSHIP NO. _____

NAME OF SECONDER _____
 MEMBERSHIP NO. _____

 SIGNATURE

 SIGNATURE

DATE RECEIVED _____
 APPLICANT INFORMED DATE _____

DATE OF EXCO MEETING _____
 MEMBERSHIP NO. _____

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PUMM Penang State Liaison	• T: (6019) 5582009	F: -
PUMM Johor State Liaison	• T: (607) 238 3800	F: (607) 238 3800
PUMM Pahang State Liaison	• T: (609) 296 2997	F: (609) 296 2997
PUMM Selangor State Liaison	• T: (6019) 918 5649	F: -

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