霹雳顺德会馆 PERAK SHUN TAK WUI KUAN

No.21-23-25, 1st Floor, Jalan Masjid, 30300 Ipoh, Perak, Malaysia.

Tel & Fax: 05-2549986

附属会员入会志愿书 APPLICATION FORM FOR ASSOCIATE MEMBERSHIP

1.	申请人姓名 Applicant's Name 中 Chinese: 英 English:		
	性别 Sex:年龄 Age:职业 Occupation:		
	联络电话 Tel No:	手提 H/P:	籍贯 Orign:
		地址 Address:	
2.	介绍会员 Introducer		
	姓名 Name of Introducer:	签名 Signa	ture of Introducer:
3.	基金及会费 Entrance Fee and Subset 附属会员入会时缴交会费 RM25.00 An associate member shall pay up an advance when application for members.	,以后在每月缴交 RM6.00 基金 n entrance fee of RM25.00 and mo	• inthly subscription of RM6.00 payable in
4.	. 附属会员没有选举权及被选权,但在理事会允许下亦可以参与本会馆活动。 Associate members are not entitled to vote or hold office but may be permitted by the General Committee to participate in the social or any other activities of the association.		
5.	余愿遵守本馆章程及 细则加入为附属会员,上述所提供之资料详情确实无讹,若有虚填或欺骗之事,一经现,将无条件接受法律追究及取消本人附属会员籍。		
	I agree to uphold the rules and regulations of your association as associate member and I declare the particulars given above herein are true and correct. If and false particulars are found, my membership will be terminated immediately.		
申	请日期 Date of Application:	申请人签名 Sign	nature of Application:

^{*}本理事会的决定是最后的决定。 I understand that the decision of the Committee is final and conclusive.