

MEMBERSHIP FORM/BORANG AHLI

Open to all Muslims of Ethnic Chinese Descent and other Muslims/Organisations (Associate Members)



**To Secretary, MACMA MALAYSIA:
Malaysia Chinese Muslim Association.**

马来西亚华人穆斯林协会

Unit 1003, Block A, Phileo Damansara 1,
No 9, Jalan 16/11, Off Jalan Damansara,
46350 Petaling Jaya, Selangor D.E.

Nombor telefon: 603-79323207 Fax: 603-79321207

Email: admin@macma.my, setiausaha@macma.my

Passport Photo

Name/ Please underline Surname: _____

Gender : _____ Marital Status : _____ Age : _____

Age of Children : _____

I.C. No. _____ Date & Place of Birth: _____

Home Address: _____

Email: _____ Skype /Messenger : _____

Tel. No (Hse) : _____ Mobile No: _____

Tel No (Off) : _____ Fax No : _____

Occupation: _____

Company/Organization _____

Race/Origin: Chinese Descent: []/Others _____

Date Embraced Islam(If applicable): _____ Place _____ Married: [] / Single:[]

Language : English []/Mandarin []/B.Malaysia []/Others []

I wish to register as A LIFE/ORDINARY/ORGANIZATION/ASSOCIATE* MEMBER of MACMA and attach herewith Membership Fee by Cheque/ Bank Draft/Postal Order/cash as below:

Note: Please Attach your Business Card and Passport photograph

RM10.00/1 Year Membership []; RM 20.00/3 Years: []; RM 50.00/9 Years []

RM 20.00 Life Member : [] ORDINARY * Delete & Tick as appropriate

Signature _____ Date _____

For Office Use

Approval date: _____ MACMA Membership No. _____ [Life/Ordinary/Associate]

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