



Malaysia Saiva Narpani Kalagam Membership Subscription Form

Reg No: _____

Personal Details

Name: _____ NRIC No/ Passport No: _____

DOB: ____/____/____ Gender: Male Female Nationality: _____

Occupation: _____ E-mail: _____

Contact Details: _____ Mailing Address: _____

Tel No : _____ (Res) _____ (Off) _____

Fax No: _____ (Res) _____ (Off) _____

Mobile (H/P) : _____

Application Type:

Ordinary Membership (1st Time) : Registration & Yearly Subscription Fee of RM 35.00

Ordinary Membership Yearly Renewal : Yearly Subscription Fee of RM 25.00

Lifetime Membership : Lifetime Subscription Fee of RM 50.00

I hereby declare that all the information provided herein is true, complete and correct. I agree to the Terms and Conditions of the Membership and will adhere to all the Regulations prescribed by Association of Saiva Narpani Malaysia (MSNK).

Signature of Applicant: Date: ____/____/____

Note: Please submit 2 Passport Sized recent color photos and the Subscription Fee (Cash / Cheque Payable to Persatuan Saiva Narpani Malaysia) upon submission of this form. A temporary receipt will be issued upon receipt of payment. Membership card will be issued and sent to you once this form is duly processed by MSNK.

For MSNK Office Use Only

Proposed By: _____ Seconded By: _____

Application Status: Approved Rejected Suspended

.....
Secretary

.....
President

Malaysia Saiva Narpani Kalagam

Dear Mr/Ms: _____,

We are please / regret to inform you that your application for MSNK Membership Subscription dated _____ is approved / rejected / suspended. Your Membership Number is _____.

Thank you.

Your faithfully,

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Secretary