

Malaysian Society of Rheumatology - Membership Application Form

Name :.....

Date of Birth :..... Sex : M / F

Occupation :..... Specialty :.....

Address (Home) :.....

.....

Postcode :..... State :.....

Tel :..... Fax :.....

Address (Work) :.....

.....

Postcode :..... State :.....

Tel :..... Fax :.....

Email address :

I enclose herewith:

Membership	Entrance Fee	Annual Subscription	Five years' subscription
a. Ordinary member	RM 50.00 ()	RM 20.00 ()	RM 100.00 ()
b. Associate member*	RM 30.00 ()	RM 10.00 ()	RM 50.00 ()
c. Corporate member	RM 500.00 ()	RM 300.00 ()	RM 1500.00 ()

* For paramedic

Please cross your cheque and make it payable to **Malaysian Society of Rheumatology**.

Please send your application form and crossed cheque to:

Malaysian Society of Rheumatology
A-2-15, Block A, Merchant Square @ Tropicana
No.1, Jalan Tropicana Selatan 1, PJU 3,
47410 Petaling Jaya,
Selangor Darul Ehsan.

Signature of applicant

Date