



THE SHIPPING CLUB, Malaysia

MEMBERSHIP APPLICATION FORM

Date: ___/___/___

I hereby wish to apply for individual Membership of The Shipping Club, Malaysia

Members Information

Member Name: _____

NRIC/Passport No: _____ Nationality/Religion: _____

Marital Status: _____ Date of Birth: _____

Home Address: _____

_____ Postcode _____

Home Tel: _____ Hand-phone: _____ E-mail: _____

Name of Company: _____

Business Address: _____

Position: _____ Tel (Office): _____ Office Fax: _____

Nature of Business: _____

Supplementary Membership

If you wish supplementary membership for any member/s of your family, fill in details below (*use separate sheet of paper with the same details*)

Name: _____ Relationship: _____

NRIC/Passport No: _____ Nationality/Religion: _____

Introduced by: _____

Introducer

Name of Introducer: _____ Membership No: _____

Declaration by Applicant

I hereby confirm that the information given herein is true and accurate

Signature: _____ Date: _____

For Office Use Only:

Application Status: Approved Not Approved

Membership No: _____

_____ *The Shipping Club / Date*

For more info visit our office: The Shipping Club, Malaysia, Suite 88-1C-M, No.88, Intan Millennium Square 2,
Jalan Batai Laut 4, Taman Intan, 41300 Klang, Selangor Malaysia.

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