



REGISTRATION FORM
PERSATUAN KESIHATAN ENVIRONMEN MALAYSIA
MALYSIAN ASSOCIATION OF ENVIRONMENTAL HEALTH (MAEH)
(REGISTRATION NO 1105 Wilayah Persekutuan)

1. Name :
(Block Letter)
2. E-mail Address :
3. NRIC No :
4. Date of Birth :
5. Address – Office
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.....
6. Address – House :
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.....
.....
7. Office Tel / HP No :
:.....
8. House Tel No
9. Qualifications (Title / Year / College / University)
Diploma :
Degree :
Master:
PhD:
10. Current post :
11. State whether you are a member of any organization (the full name of the organization, any post held)
a) b)
12. I enclosed herewith cheque/money order/cash for RM39.00 being the payment of yearly subscription RM36.00 and entrance fee RM3.00.
13. My signature hereon constitutes an agreement to abide by the Rules of the Persatuan Kesihatan Environmen Malaysia.
-
Date
-
Signature of Applicant

FOR OFFICIAL USE ONLY

Registration No : Folio No :

Date approved by Management Council :

Entrance Fee Receipt No : Subscription No :

APPROVED / NOT APPROVED

Date :
Signature of President