 **Persatuan Perkhidmatan Pensterilan Malaysia (PPPM)**

 ***Malaysia Sterile Service Association (MSSA)***

 Address : 48, Jalan SS 15/5C, 47500 Subang Jaya, Selangor, Malaysia

 Tel : +603-5612 3466 / +603-5634 2618

Fax : +603-5634 1618

 Web : www.mssa.com.my **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BORANG PEMBAHARUAN KEAHLIAN / MEMBERSHIP RENEWAL FORM**

Nama Penuh / Full Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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No. Kad Pengenalan / IC. No: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

No. Ahli MSSA / MSSA Membership No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alamat / Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kadar bayaran setahun / Yearly subscription:

Ahli Biasa/ Ordinary Member : RM 50.00

Ahli Bersekutu / Affiliate Member : RM 40.00

Bayaran boleh dibuat melalui cek / deposit tunai / pemindahan telegraf kepada:.

Bukti pembayaran hendaklah dihantar ke PPPM.

Payments can be made through cheque / cash deposit / telegraphic transfer to:

Proof of payment should be sent to PPPM

Maklumat pembayar / Detail payment:

 Penama / Payable : **MALAYSIAN STERILE SERVICE ASSOCIATION**

 Nama Bank / Bank Name : CIMB Bank

 No Akaun / Accountu No : **8002601587**.

Bersama ini disertakan Cek / Slip Deposit Tunai / Slip Pemindahan Telegraf berjumlah

RM \_\_\_\_\_\_\_\_\_\_\_\_\_ yuran tahunan bagi tahun \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Enclosed herewith is a Cheque/Cash Deposit Slip/Telegraphic Transfer Slip amounting RM \_\_\_\_\_\_\_\_\_\_\_\_\_\_ yearly subscription for the year of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 Jumlah RM:

(Perlembagaan PPPM Rev: 03/2013 (Article 7:7.2) memperuntukan yuran keahlian hendaklah dijelaskan pada 31 Mac setiap tahun.

The PPPM Constitution Rev: 03/2013 (Article 7:7.2) stipulates that membership fees should be clarified by March 31 each year.)

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**UNTUK KEGUNAAN PEJABAT / *FOR OFFICE USE***

No. Ahli/Membership No....................................No. Resit/Receipt No:.................................

Tandatangan/Signature.......................................................