



KELAB MENEMBAK PULAU PINANG

(Penang Rifle Club) Since 1954

Registration No : 0771/99

804, MUKIM 16, WATERFALL ROAD, 10350 PENANG.

TEL: 604-2262484 ; FAX: 604-2270600 Email: info@kmpp.com.my ; Web: www.kmpp.com.my

APPLICATION FOR MEMBERSHIP

The Honorary Secretary

Kelab Menembak Pulau Pinang

Dear Sir

1. I hereby apply for Membership in Kelab Menembak Pulau Pinang.
(Please tick the required type of membership below)

Type of Membership:-	Entrance Fee + Annual Subscription (RM)	Total Payable (RM)
a) Ordinary (OM)	4000.00 500.00	4,500.00
b) Student (SM)	Exempted 110.00	110.00

2. I agree to fully abide by the Constitution and By-Laws of the club.
3. I enclose herewith six (6) copies of a recent photograph of myself and three (3) copies of my Identity Card / Passport
4. Have you applied as a member before? **YES / NO**
5. I **possess/do not possess** the following firearm/firearms (Please attach photostat copy of firearm licence.)

ΔGun Licence No: _____ Caliber & Firearm type: _____

ΔMaker's Name & Serial No.: _____

I certify that I am a citizen/permanent resident of good repute and I am not a member of any organization or group having as its purpose or one of its purposes the overthrow by force and violence of the Government of Malaysia; that I have never been convicted of a criminal offence; and that, I solemnly and sincerely declare that the particulars given by me in this application are accurate, factual and true; and that if admitted to membership, I will fulfill the obligations of good sportsmanship.

(NOTE: An administrative fee of RM 300.00 will be imposed if your application for membership is unsuccessful)

Yours faithfully,

(_____)

Date submitted: _____

FOR OFFICIAL USE

Approved / Rejected / KIVed

Date of committee meeting: _____

Application checked by: _____

Date of application received: _____

(Committee Chairman)

PERSONAL PARTICULARS

(To be filled up in Block Capital Letters)

Name of Applicant: _____
[As Per IC/MyKad]

Name in Chinese: _____

Father's Name: _____

Present Address: _____

Post Code: _____ State: _____

Home Address (5years ago): _____

Post Code: _____ State: _____

New IC No. / Colour: _____ Old IC No.: _____

House Telephone: _____ Handphone: _____

Date of Birth: _____ Place of Birth: _____

Marital Status: _____ Sex: _____

Race: _____ Nationality: _____

E-Mail: _____

Name of Employer / School: _____

Office / School Address: _____

Post Code: _____ State: _____

Telephone: _____ Fax: _____

Occupation : _____

=====

I hereby certify that I have known the above applicant personally for years, and that I hereby vouch for his / her good repute and character.

Proposer : _____

Membership No : _____

Signature : _____

Seconder : _____

Membership No : _____

Signature : _____