



沙巴亞庇林氏宗親會 (0605-05-14)

Pertubuhan Persaudaraan Lim Kota Kinabalu Sabah

半身相片二張

2 Copies of
Passport Size

Photographs

入會申請表格 Application for Membership

申請人姓名 (中文) _____ 姓名(英文) _____
Name of Applicant (Chinese) Name of Applicant (English)

身份證號碼 NRIC No. _____ 性別 _____

出生日期 _____ 日 _____ 月 _____ 年 _____ 出生地點 _____
Date of Birth day month year Place of Birth

通訊地址 Postal Address _____

住址 Residence Address _____

電話 (手機) _____ (辦事處) _____ (傳真) _____
Telephone (Hand Phone) (Office) (Telefax)

電話 (住宅) _____ 電郵地址 _____
Telephone (Residence) Email Address

籍貫 _____ 職業 _____
Native Town Occupation

學歷 Education _____

本人謹以至誠,申請加入貴會成為*榮譽永久會員/永久會員/普通會員/附屬會員,付上本人身份證副本一張,入會基金RM 10.00 及*榮譽永久會員費 RM1,000 /永久會員費 RM200 /普通會員年捐RM30 / (附屬會員) RM 15,並願意遵守會之章程條文.

I wish to apply for admission to be *a Honorary Life/a Life/an Ordinary/an Associated Member of Pertubuhan Persaudaraan Lim Kota Kinabalu Sabah and I agree to be bound by the provisions of the Regulations of the Association. I enclose herewith a photostated copy of my Identity Card together with RM10.00 being Entrance Fee and RM 1,000/RM200/RM30/RM15.00 being *Honorary Life / Life Member Fee / Subscription for Ordinary / Associated Member.

(A/C No: Pertubuhan Persaudaraan Lim KK Sabah, RHB 210018-00145011)

申請人簽署 _____ 日期 _____
Signature of Applicant Date

介紹人姓名 (1) _____ 簽署 _____
Introducers (本會合格會員 Existing Member) Signature

介紹人姓名 (2) _____ 簽署 _____
Name of Introducer (本會合格會員 Existing Member) Signature

註：申請人必須是年齡滿21歲之大馬公民及居留於沙巴不少過一年。

Note: Applicant should be Malaysian who has attained the age of 21 and stayed in Sabah for at least one year

(供本會用 For Official Use Only)

入會費 RM _____ 永久會員費 / 年捐 _____ 收據號碼 _____
Entrance Fee Life Member Fee / Subscription Receipt No.

會員： _____ 財政簽署 _____
Membership: Life / Ordinary /Associated Treasurer

會長簽署 _____ 秘書簽署 _____ 批准日期 _____
Chairman Secretary Approved On

註備(Remarks) _____